



Naval Education and
Training Command

NAVEDTRA 80669
June 1989
0503-LP-218-9600

Nonresident
Training Course
(NRTC)

Hospital Corpsman 3 & 2

Only one answer sheet is included in the NRTC. Reproduce the required number of sheets you need or get answer sheets from your ESO or designated officer.

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Errata #2
Stock Ordering No.
0503-LP-218-9602

17 Jul 95

Specific Instructions and Errata for
Nonresident Training Course

Hospital Corpsman 3 & 2, NAVEDTRA 80669

1. No attempt has been made to issue corrections for errors in typing, punctuation, and so forth, which do not affect your ability to answer the questions.
2. To receive credit for deleted questions, show this errata to your local course administrator (ESO/scorer). The local course administrator is directed to correct the course and answer key by indicating the questions deleted.
3. This errata supersedes all previous errata.
4. Assignment Booklet, NAVEDTRA 80669

Delete the following questions and leave the corresponding space blank on the answer sheet:

Questions

1-8	2-2	3-10	6-16
1-10	2-18	3-72	6-23
1-25	2-31		
1-66	2-33		

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HOSPITAL CORPSMAN 3 & 2

NAVEDTRA 80669

Prepared by the Naval Education and Training
Program Management Support Activity,
Pensacola, Florida

THE TEXT FOR THIS COURSE IS HOSPITAL CORPSMAN 3 & 2
NAVEDTRA 10669-C

This self-study course is only one part of the total Navy training program. By its very nature it can take you only part of the way to a training goal. Practical experience, schools, selected reading, and YOUR desire to succeed are also necessary to successfully round out a fully meaningful training program.

HOW TO COMPLETE THIS COURSE SUCCESSFULLY

ERRATA: If an errata comes with this course, make all indicated changes or corrections before you start any assignment. Do not change or correct the Training Manual (TRAMAN) or assignments in any other way.

TEXTBOOK ASSIGNMENTS: The TRAMAN pages that you are to study are listed at the beginning of each assignment. Study these pages carefully before attempting to answer the questions in the course. Pay close attention to tables and illustrations because they contain information that will help you understand the text. Read the learning objectives provided at the beginning of each chapter. Learning objective state what you should be able to do after studying the material. Answering the questions correctly helps you accomplish the objective.

BLACK DOT INFORMATION: Black dots ● may be used in the text and correspondence course to emphasize important information or supplemental information and to highlight instructions for answering certain questions. Read these black dot entries carefully; they will help you answer the questions and understand the material.

SELECTING YOUR ANSWERS: After studying the text, you should be ready to answer the questions in the

assignments. Read each question carefully, then select the BEST answer. Be sure to select YOUR answer from the subject matter in the TRAMAN. You may refer freely to the TRAMAN and seek advice and information from others on problems that may arise in the course. However, the answers must be the result of your own work and decisions. You are prohibited from referring to or copying the answers of others and from giving answers to anyone else taking the same Failure to follow these rules can result in suspension from the course and disciplinary action by the Commander, Naval Military Personnel Command.

SUBMITTING COMPLETED ANSWER SHEETS: It is recommended that you complete all assignments as quickly as practicable to derive maximum benefit from the course. However, as a minimum your schedule should provide for the completion of at least one assignment per month--a requirement established by the Chief of Naval Education and Training. Failure to meet this requirement could result in disenrollment from the course.

TYPES OF ANSWER SHEETS: If you received Automatic Data Processing (ADP) answer sheets with this course, the course is being administered by the Naval Educational and Training Program Management Support Activity (NETPMSA), and you should follow the instructions in paragraph A below. If you did NOT receive ADP answer sheets with this course, you should use the

manually scored answer sheets attached at the end of the course and follow the directions contained in paragraph B below.

A. ADP Answer Sheets

All courses administered by NETPMSA include one blank ADP answer sheet for each assignment. For proper computer processing, use only the original ADP answer sheets. Reproductions are not acceptable.

Recording Information on the ADP Answer Sheets: Follow the "MARKING INSTRUCTIONS" on the answer sheets. Be sure that blocks 1, 2, and 3 are filled in correctly. This information is necessary for your course to be properly processed and for you to receive credit for your work.

As you work the course, be sure to mark your answers in the course booklet since your answer sheet will not be returned to you. When you have completed an assignment, transfer your answers from the course booklet to the answers sheet.

Mailing the Completed ADP Answer Sheets: As you complete each assignment, mail the completed ADP answer sheet to:

Commanding Officer
Naval Education and Training
Program Management Support
Activity
Pensacola, FL 32509-5000

The answer sheet must be mailed in envelopes, which you must either provide yourself or get from the local Educational Service Office (ESO). You may enclose more than one answer sheet in a single envelope. Remember, regardless of how many answer sheets you submit at a time, NETPMSA should receive at least one a month. NOTE: DO NOT USE THE COURSE COMMENTS PAGE AS AN ENVELOPE FOR RETURNING ANSWER SHEETS OR OTHER COURSE MATERIALS.

Grading: NETPMSA will grade your answer sheets and notify you

by letter of any incorrect answers. The passing score for each assignment is 3.2. Should you score less than 3.2 on any assignment, a blank ADP answer sheet will be enclosed with the letter listing the questions incorrectly answered. You will be required to redo the assignment and resubmit a new completed answer sheet. The maximum score that can be given for a resubmitted assignment is 3.2.

Course Completion: When you complete the last assignment, fill out the "Course Completion" form in the back of the course and enclose it with your last answer sheet. NETPMSA will issue you a letter certifying that you satisfactorily completed the course. You should ensure that credit for the course is recorded in your service record by ESO.

Student Questions: Any questions concerning this course should be referred to the Commanding Officer, Naval Health Sciences Education and Training Command (Code 5), Bethesda, MD 20814-5022.

B. Manually Scored Answer Sheets

If you did not receive ADP answer sheets with this course, it is being administered by your local command, and you must use the answer sheets attached at the end of the course booklet.

Recording Information on the Manually Scored Answer Sheet: Fill in the appropriate blanks at the top of the answer sheet. This information is necessary for your course to be properly processed and for you to receive credit for your work. As you work the course, be sure to mark your answers in the course booklet, since your answer sheets will not be returned to you. When you have completed an assignment transfer your answers from the course booklet to the answer sheet.

Submitting the Completed Manually Scored Answer Sheets: As you complete each assignment,

submit the completed answer sheet to your ESO for grading. You may submit more than one answer sheet at a time. Remember, you must submit at least one assignment a month.

Grading: Your ESO will grade the answer sheets and notify you of any incorrect answers. The passing score for each assignment is 3.2. Should you score less than 3.2 on any assignment, the ESO will not only list the questions incorrectly answered but will also give you a pink answer sheet marked "RESUBMIT." You will be required to redo the assignment and complete the "RESUBMIT" answer sheets. The maximum score that can be given for a resubmitted assignment is 3.2.

Course Completion: After you have submitted all answer sheets and have earned at least a 3.2 on each assignment, your command will give you credit for this course by making the appropriate entry on Page 4 of your service record.

Student Questions: Any questions concerning the administration of this course should be referred to your ESO.

NAVAL RESERVE RETIREMENT CREDIT

This course is evaluated at 10 Naval Reserve retirement points. These points are creditable to personnel eligible to receive them under current directives governing retirement of Naval Reserve personnel.

Naval Reserve retirement credit will not be given for this course if the student has previously received retirement credit for any Hospital Corpsman 3 & 2 NRTC.

The date of completion for this course or units is the date processed through the NETPMSA ADP System, and not the day deposited in the mail. Answer sheets and "Course Completion" forms submitted by reserve personnel should be mailed at least 60 days prior to their anniversary date.

Naval courses may include several types of questions-multiple-choice, true-false, matching, etc. The questions are not grouped by type but by subject matter. They are presented in the same general sequence as the textbook material upon which they are based. This presentation is designed to preserve continuity of thought, permitting step-by-step development of ideas. Not all courses use all of the types of questions available. The student can readily identify the type of each question, and the action required, by inspection of the samples given below.

MULTIPLE-CHOICE QUESTIONS

Each question contains several alternatives, one of which provides the best answer to the question. Select the best alternative, and blacken the appropriate box on the answer sheet.

SAMPLE

s-1. Who was the first person appointed Secretary of Defense under the National security Act of 1947?

1. George Marshall
2. James Forrestal
3. Chester Nimitz
4. William Halsey

Indicate in this way on the answer sheet:

	1	2	3	4	
	T	F			
s-1	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	---

TRUE-FALSE QUESTIONS

Mark each statement true or false as indicated below. If any part of the statement is false the statement is to be considered false. Make the decision, and blacken the appropriate box on the answer sheet.

SAMPLE

s-2. All naval officers are authorized to correspond Officially with any systems command of the Department of the Navy without their respective commanding officer's endorsement.

1. True
2. False

Indicate in this way on the answer sheet:

	1	2	3	4	
	T	F			
s-2	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	---

MATCHING QUESTIONS

Each set of questions consists of two columns, each listing words, phrases or sentences. The task is to select the item in column B which is the best match for the item in column A that is being considered. Items in column B maybe used once, more than once, or not at all. Specific instructions are given with each set of questions. select the numbers identifying the answers and blacken the appropriate boxes on the answer sheet.

SAMPLE

In questions s-3 through s-6, match the name of the shipboard officer in column A by selecting from column B the name of the department in which the officer functions. Some responses maybe used once, more than once, or not at all.

A. OFFICER

B. DEPARTMENT

- | | |
|-------------------------------|---------------------------|
| s-3. Damage Control Assistant | 1. Operations Department |
| s-4. CIC Officer | 2. Engineering Department |
| s-5. Disbursing Officer | 3. Supply Department |
| s-6. Communications Officer | |

Indicate in this way on the answer sheet:

	1	2	3	4	
	T	F			
s-3	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	---
s-4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	---
s-5	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	---
s-6	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	---

Assignment 1

ASSIGNMENT 1

Hospital Corpsman--Professional Development: History of the Hospital Corps:
Anatomy and Physiology

Textbook Assignment: Pages 1 through 3-35

- 1-1. In a patient care environment, you can help put your patients at ease by
1. giving courteous, efficient, and conscientious service
 2. respecting their right to privacy
 3. reflecting their worth and dignity as human beings
 4. all of the above
- 1-2. As part of the patient care team, you should
1. carry out the physicians' and nurses' orders and give proper nursing care to patients
 2. assume overall responsibility for patient welfare
 3. assume overall responsibility for meeting the nursing needs of the patient
 4. take the place of absent nurses or physicians
- 1-3. Principles of personal finance that you should follow include all of the following EXCEPT
1. living within your means
 2. avoiding financial dealings with patients
 3. making credit card purchases in excess of your ability to pay
 4. paying your bills on time
- 1-4. Personal integrity is demonstrated by
1. ensuring strict accountability for all controlled substances
 2. refraining from spreading gossip
 3. living up to one's promises
 4. all of the above
- 1-5. Naval leadership is based on all of the following EXCEPT
1. ensuring strict accountability for all controlled substances
 2. refraining from spreading gossip
 3. living up to one's promises
 4. all of the above
- 1-6. An HN or HM3 can get a list of required and recommended study materials and courses for advancement from
1. NAVEDTRA 10052
 2. NAVEDTRA 18068
 3. NAVPERS 1414/4
 4. OPNAVINST 1500.1
- 1-7. When studying training courses, you should follow each of the following steps EXCEPT
1. reading each chapter in detail
 2. studying sections related to your job and skimming the rest
 3. listing questions you have about each section of the course
 4. establishing a regular study schedule
- Question 1-8 is based on the following titles:
- a. Apothecary
 - b. Surgeon's steward
 - c. Loblolly boy
 - d. Pharmacist's mate
 - e. Hospital Corpsman
- 1-8. The chronological sequence of titles for enlisted medical personnel is
1. b, a, d, c, e
 2. b, c, a, d, e
 3. c, a, b, d, e
 4. c, b, a, d, e

- 1-9. The Bureau of Medicine and Surgery (BUMED) , now known as the Naval Medical Command, was established in
 1. 1776
 2. 1842
 3. 1898
 4. 1942
- 1-10. The Hospital Corps came into existence as an organized unit of the Medical Department in
 1. 1774
 2. 1860
 3. 1898
 4. 1916
- 1-11. Since the Hospital Corps' inception, the nation's highest the Medal of Honor, has been awarded to how many corpsmen?
 1. 8
 2. 15
 3. 17
 4. 21
- 1-12. When the body is in the anatomical position, the thumbs point
 1. medially
 2. laterally
 3. anteriorly
 4. posteriorly
- 1-13. When in the supine position, a person is
 1. sitting upright
 2. lying on his/her face
 3. lying on his/her back
 4. lying face down
- 1-14. The physical and chemical breakdown of the food we eat is called
 1. digestion
 2. metabolism
 3. anabolism
 4. catabolism
- 1-15. Homeostasis is
 1. control of bleeding
 2. absorption, storage, and use of food products
 3. self-regulated control of the body's internal environment
 4. the power of voluntary movement
- 1-16. The portion of a cell that contains all the genetic material for reproduction is the
 1. plasma membrane
 2. nucleus
 3. cytoplasm
 4. reticulated endothelium
- 1-17. Tissues are groups of specialized cells similar in structure and function. The lining tissue of the body is called
 1. connective
 2. areolar
 3. sebaceous
 4. epithelial
- 1-18. The accretion of digestive fluids and the absorption of digested foods and liquids is the chief function of which tissue?
 1. Columnar
 2. Osseous
 3. Serous
 4. Squamous
- 1-19. Because this tissue is continuous throughout the body, if an infection were allowed to spread, it could reach every area of the body by moving through _____ tissue.
 1. Areolar
 2. Adipose
 3. Osseous
 4. Fibrous
- 1-20. The two most prominent mineral elements of bone are
 1. oasein and calcium
 2. phosphorus and calcium
 3. sodium and phosphorus
 4. periosteum and ossein
- 1-21. A decreased red blood cell (RBC) count could be the result of a medical condition affecting the
 1. compact bone
 2. periosteum
 3. yellow marrow
 4. red marrow
- 1-22. The bones of the wrist are classified as _____ bones.
 1. long
 2. short
 3. flat
 4. irregular

- 1-23. The appendicular skeleton is composed of the bones of the
1. skull and vertebral column
 2. thorax and vertebral column
 3. pelvis and thorax
 4. arms and legs
- 1-24. Bones of the cranium include the
1. maxilla
 2. occipital
 3. atlas and axis
 4. foramen magnum
- 1-25. The vertebral column consistm of the cervical, thoracic, and lumbar vertebrae, the sacrum, and the coccyx. Respectively, how many bones me in the cervical, thoracic, and lumbar regions?
1. 2, 5, 12
 2. 2, 12, 5
 3. 5, 12, 7
 4. 5, 12, 7
- 1-26. The upper three ribs on each side are known as _____ ribs
1. true
 2. false
 3. floating
 4. sternal
- 1-27. A fracture of the humerus is frequently located at the
1. head
 2. acetabulum
 3. surgical neck
 4. lesser tuberosity
- 1-28. The Innominate bone is composed of three parts that are united in adults to form a cuplike structure called the
1. glenoid fosaa,
 2. acetabulum
 3. symphysis pubis
 4. obturator foramen
- 1-29. The prominences easily felt on the inner and outer aspects of the ankle are called
1. medial and lateral malleolus
 2. medial and lateral condylez
 3. greater and lesser tuberosities
 4. greater and lesser trochanters
- 1-30. Bones that develop within a tendon are known as _____ bones.
1. condyloid
 2. sesamoid
 3. vermiform
 4. falsiform
- 1-31. Moving an extremity away from the body is called
1. flexion
 2. extension
 3. abduction
 4. adduction
- 1-32. The act of straightening a limb is known as
1. flexion
 2. extension
 3. abduction
 4. adduction
- 1-33. The primary functions of the muscles include all of the following EXCEPT
1. providing heat during activity
 2. maintaining body posture
 3. producing red blood cells
 4. providing movement
- 1-34. The ability of muscles to regain their original form when stretched is known as
1. contractibility
 2. elasticity
 3. extensibility
 4. tonicity
- 1-35. Actin and myosin are the two protein substances involved in
1. muscles recovery
 2. muscles nourishment
 3. muscle contraction
 4. rigor mortis
- 1-36. The ability of muscles to respond to a stimulus is known as the property of
1. contractibility
 2. Irritability
 3. extensibility
 4. tonicity

- 1-37. A generally sedentary person who is in less than good physical condition who enters a marathon with intent to complete the race
1. is not taking a significant risk if the day is cool
 2. can overcome his physical deficiency with a carbohydrate rich diet before the race
 3. will be okay if stretching exercises are performed before the race
 4. runs the risk of muscle damage
- 1-38. Intramuscular injection are frequently given in the _____ muscle.
1. trapezius
 2. pectorallis majoris
 3. deltoid
 4. biceps brachii
- 1-39. Massive intramuscular injections are usually given in the
1. quadriceps
 2. sartorius
 3. gastrocnemius
 4. gluteus maximus
- 1-40. The body's primary thermo-regulatory action is a function of dilating and contracting blood vessels and the
1. stratum germinativum
 2. sweat glands
 3. sebaceous glands
 4. melanin
- 1-41. The transfer of fluids across the plasms membrane of a cell from an area of lower concentration to an area of higher concentration is a process known as
1. infusion
 2. diffusion
 3. perfusion
 4. osmosis
- 1-42. The total blood volume in the average adult is _____ liters.
1. 3 to 4
 2. 4 to 5
 3. 5 to 6
 4. 6 to 7
- 1-43. Blood of the average female adult contains _____ million RBCs per _____
1. 4.5, mm³
 2. 6, cm³
 3. 4.5, l
 4. 4.3, low power field
- 1-44. A white blood cell (WBC) count of 18.000 may indicate
1. leukocytosis
 2. normalcy
 3. infection
 4. vitiligo
- 1-45. In an accident victim suffering from a fibrinogen deficiency, the rescuer may have difficulty
1. controlling hemorrhage
 2. immobilizing a fracture
 3. supporting respiratory function
 4. reducing a dislocation
- 1-46. When a blood clot forms, in addition to preventing excessive blood loss, it also
1. converts fibrinogen into blood serum to aid healing
 2. forms the foundation for new tissue growth
 3. manufactures leukocytes to help fight infection
 4. serves no other purpose
- 1-47. The valves of the heart include all of the following EXCEPT
1. atrial
 2. mitral
 3. tricuspid
 4. pulmonary
- 1-48. Oxygenated blood is carried by which vein?
1. Inferior vena cava
 2. Superior vena cava
 3. Portal
 4. Pulmonary
- 1-40. The contraction phase of the heart is
1. systole
 2. tension
 3. diastole
 4. active

- 1-50. The pulse pressure is the difference between
 1. venous and arterial pressure
 2. resting and active pulse rate
 3. atrial and ventricular pressure
 4. systole and diastole
- 1-51. The venous system that carries digested materials from the intestinal tract is the
 1. portal
 2. pulmonary
 3. abdominal
 4. pelvis
- 1-52. Lymph nodes participate in all of the following EXCEPT
 1. manufacturing of white blood cells
 2. filtration of bacterial debris
 3. production of hormones
 4. collection of large protein molecules
- 1-53. Windpipe is another term for
 1. nares
 2. larynx
 3. trachea
 4. pharynx
- 1-54. The primary muscle of respiration is the
 1. pleura
 2. alveolus
 3. diaphragm
 4. mediastinum
- 1-55. Cessation of breathing is
 1. apnea
 2. bradypnea
 3. hypopnea
 4. dyepnea
- 1-56. A nerve cell, or neuron, is composed of all of the following EXCEPT a/an
 1. synapse
 2. axon
 3. cyton
 4. dendrite
- 1-57. The impulse receptors of a nerve are the
 1. dendrites
 2. Schwann cells
 3. ganglia
 4. terminal filaments
- 1-58. The space through which a nerve impulse passes from one neuron to another is called a/an
 1. myelin sheath
 2. synapse
 3. axon
 4. ganglion
- 1-59. Balance, coordination of movement, and harmony of motion are functions of the
 1. cerebral cortex
 2. cerebellum
 3. pons
 4. temporal lobe
- 1-60. The medulla oblongata is the principle site of control for
 1. circulation and respiration
 2. memory
 3. sight and hearing
 4. formation of cerebral spinal fluid
- 1-61. The meninges, membrane layers covering the brain and spinal cord, are composed of all of the following EXCEPT the
 1. dura mater
 2. pia mater
 3. archnoid
 4. foremen magnum
- 1-62. Cerabral spinal fluid is produced in the
 1. ventricles of the brain
 2. spinal cord
 3. meninges
 4. medulla oblongata
- 1-63. The 12 pairs of cranial and 31 pairs of spinal nerves form the
 1. peripheral nervous system
 2. central nervous system
 3. solar plexus
 4. brachial plexus

In answering questions 1-64 through 1-67, select from column B the cranial nerve that most closely corresponds to the function in column A.

<u>A</u> <u>Function</u>	<u>B</u> <u>Cranial</u> <u>nerves</u>
1-64. Controls the muscles of the tongue	1. Facial 2. Trigeminal
1-65. Transmits sensation of taste	3. Hypoglossal 4. Glossopharyngeal
1-66. Stimulates the parotid glands	
1-67. Receives sensory input from the face	
1-68. The cauda equina is formed by 1. thoracic and lumbar spinal nerves 2. lumbar and sacral spinal nerves 3. brachial and lumbar plexuses 4. cervical and brachial plexuses	
1-69. The autonomic nervous system is composed of two main divisions: the 1. pons and medulla oblongata 2. voluntary and involuntary system 3. sympathetic and parasympathetic systems 4. cerebrum and cerebellum	
1-7. Conservation and restoration of energy are the result of nerve impulses arising from the 1. sympathetic nervous system 2. parasympathetic nervous system 3. voluntary nervous system 4. ganglia of the medulla oblongata	

In answering questions 1-71 through 1-74, select from column B the nervous system that most closely corresponds to the response in column A.

<u>A</u> <u>Functional</u> <u>response</u>	<u>Nervous</u> <u>systems</u>
1-71. Increased heart rate	1. Sympathetic 2. Parasympathetic
1-72. Vasoconstriction	
1-73. Stimulates secretion of sweat glands	
1-74. Dilates pupils	
1-75. The cornea is part of the protective outer layer of the eye called the 1. sclera 2. conjunctiva 3. choroid 4. crystalline body	

Assignment 2

Anatomy and Physiology (continued): First Aid and Emergency Procedures

Textbook Assignment: pages 3-36 through 4-50

- 2-1. The inner part of the eye derives its nourishment primarily from the vascular structure of the
 - 1. conjunctiva
 - 2. sclera
 - 3. vitreous humor
 - 4. choroid
- 2-2. The anterior and posterior chambers of the eye are separated by the
 - 1. lens
 - 2. iris
 - 3. choroid
 - 4. aqueous humor
- 2-3. Dilation of the pupil is a muscular response of the iris as a result of
 - 1. increased intensity of light
 - 2. decreased intensity of light
 - 3. irritation to the sclera
 - 4. irritation to the conjunctiva
- 2-4. Seeing in the dark is made possible by the
 - 1. rods
 - 2. cones
 - 3. iris
 - 4. choroid
- 2-5. The mechanical transmission of sound from the tympanic membrane to the inner ear is through the
 - 1. auditory ossicles
 - 2. eustachian tube
 - 3. bony labyrinth
 - 4. organ of Corti
- 2-6. Neural stimulus used to maintain equilibrium comes from the
 - 1. fenestra rotunda
 - 2. fenestra ovalis
 - 3. semicircular canals
 - 4. organ of Corti
- 2-7. The conversion of mechanical impulses (sound waves) to neural impulses that can be interpreted by the brain is a function of the
 - 1. endolymph
 - 2. semicircular canals
 - 3. organ of Corti
 - 4. fenestra ovalis
- 2-8. Meisner's corpuscles are encapsulated nerve endings that function as primary receptors for
 - 1. pressure
 - 2. cold
 - 3. heat
 - 4. Smell
- 2-9. Hormones secreted by the endocrine system are
 - 1. secreted directly into the gland, tissue, or organ It influences.
 - 2. directed to the gland, tissue, or organ by a duct system
 - 3. secreted into the circulatory system
 - 4. typically produced in large quantities
- 2-10. The disease characterized by a deficiency of the antidiuretic hormone is
 - 1. myxedema
 - 2. diabetes insipidus
 - 3. hyperthyroidism
 - 4. Addison's disease
- 2-11. The overproduction of which hormone leads to acromegaly?
 - 1. Somatotropin
 - 2. Oxytocin
 - 3. Gonadotropin
 - 4. Thyroxin
- 2-12. An insufficient secretion of thyroxin is characterized by all EXCEPT
 - 1. weight gain
 - 2. fatigue
 - 3. profuse sweating
 - 4. slowed heart rate

- 2-13. Calcium levels in the blood are controlled by
1. thyroxin
 2. vasopressin
 3. oxytocin
 4. parathormone
- 2-14. Electrolyte balance is a function-of the hormone produced by the
1. posterior lobe of the pituitary gland
 2. anterior lobe of the pituitary gland
 3. cortex of the adrenal gland
 4. medulla of the adrenal gland
- 2-15. A metabolic response to epinephrine includes
1. decreased heart rate
 2. increased blood pressure
 3. hypoglycemia
 4. respiratory distress
- 2-16. The alpha cells of the islands of Langerhans in the pancreas produce
1. glucagon
 2. insulin
 3. norepinephrine
 4. androgena
- 2-17. The enzymatic action of ptyalin results in the chemical breakdown of
1. fats to fatty acids
 2. starches to fats
 3. starches to complex sugars
 4. proteins to complex sugars
- 2-18. The peritoneum serves which of the following functional
1. Absorption of digestive enzymes
 2. Suspension of visceral organs
 3. Secretion of a lubricating fluid
 4. All of the above
- 2-19. Absorption of food occurs predominantly in the
1. duodenum
 2. jejunum
 3. ileum
 4. cecum
- 2-20. The accessory organs of digestion for the small intestine are the
1. pancreas, liver, villae
 2. spleen, liver, gallbladder
 3. pancreas, pylorus, spleen
 4. pancreas, liver, gallbladder
- 2-21. The gallbladder
1. stimulates the production of insulin
 2. stores bile
 3. metabolize sugars
 4. produces antibodies
- 2-22. The structural and functional unit of the kidney is the
1. nephron
 2. malpighian body
 3. glomerulus
 4. loop of Henle
- 2-23. The function of the kidneys include
1. maintaining acid-base balance
 2. removing certain toxic substances
 3. removing excess sugar
 4. all of the above
- 2-24. A sometimes fatal disease resulting from failure of the kidneys to remove waste products from the blood is known as
1. bilirubinemia
 2. uremia
 3. glomerulonephritis
 4. diabetes insipidus
- 2-25. Testosterone production is a function of the
1. ductus deferens
 2. prostate gland
 3. testes
 4. bulbourethral gland
- 2-26. Fertilization of an ovum normally takes place in the
1. ovaries
 2. fallopian tubes
 3. uterus
 4. vagina

- 2-27. The primary purposes of first aid include all the following EXCEPT to
1. provide definitive medical treatment
 2. preserve resistance and vitality
 3. save life
 4. prevent further injury
- 2-28. The preliminary examination of a casualty should be done
1. in the hospital
 2. in the ambulance
 3. after making the victim comfortable
 4. before moving the casualty
- 2-29. In a trauma related incident where a patient has multiple injuries, treat _____ first.
1. fractures
 2. the most obvious injury
 3. the most life-threatening condition
 4. the most painful condition
- 2-30. Evaluation of diagnostic vital signs includes all the following EXCEPT
1. blood pressure
 2. rhythm/regularity of pulse
 3. profuse perspiration
 4. level of consciousness
- 2-31. When examining an Unconscious patient with a trauma related condition, palpate for which of the following?
1. Abdominal distention
 2. Loss of pressure sensation around the eyes
 3. Vertebral fracture
 4. Heart and lung sounds
- 2-32. In a combat scenario, a casualty sustaining numerous superficial sharpnel wounds would be triaged as a class
1. I
 2. II
 3. III
 4. IV
- 2-33. A combat casualty suffering from a blast injury without apparent external injuries but with acute abdominal pain should be triaged as a Class
1. I
 2. II
 3. III
 4. IV
- 2-34. The universal distress signal indicating an obstructed airway is
1. spasmodic coughing
 2. clutching at the throat
 3. hyperventilation
 4. cherry-red coloration of the skin or nail beds
- 2-35. To open a partially obstructed airway of a victim with a cervical spine injury, use the _____ method.
1. jaw thrust
 2. head tilt
 3. abdominal thrust
 4. chest thrust
- 2-36. In cases of complete airway obstruction deliver
1. four chest thrusts
 2. four abdominal thrusts
 3. artificial ventilation
 4. 1 or 2 above
- 2-37. Artificial ventilation is indicated in which of the following?
1. To assist ventilation in partial airway obstructions
 2. In carbon monoxide poisoning
 3. In lack of respiratory effort
 4. In cyanosis
- 2-38. Dilated pupils in a patient receiving artificial ventilation is an indication of
1. overventilation
 2. adequate ventilation
 3. insufficient ventilation
 4. hypovolemia

- 2-39. Artificial ventilation to a patient with a badly displaced mandibular fracture is best given
1. by mouth-to-mouth ventilation
 2. by mouth-to-nose ventilation
 3. with an oxygen mask
 4. by the back-pressure arm-lift method
- 2-40. The major problem you should anticipate when relieving gastric distention is
1. reduced lung volume
 2. internal bleeding
 3. vomiting
 4. cardiac arrest
- 2-41. When ventilating an infant using the mouth-to-mask method, an airtight seal is best obtained by
1. fitting the apex of the mask over the bridge of the nose
 2. fitting the apex of the mask over the chin
 3. compressing the collar of an adult mask
 4. attaching an oxygen line
- 2-42. One of the distinct advantages of using an esophageal obturator airway is
1. it can be inserted directly into the trachea
 2. the tracheal-bronchial tree can be readily suctioned
 3. it cannot be misplaced
 4. it helps prevent vomiting
- 2-43. Cricothyroidotomy is the process or technique of
1. hyperextending the neck
 2. creating an opening to the trachea
 3. auctioning the trachea
 4. inserting an esophageal obturator airway
- 2-44. The best place to find the pulse of an unconscious patient is the _____ artery.
1. pulmonary
 2. carotid
 3. apical
 4. radial
- 2-45. A fracture of the xiphoid tip of the sternum during CPR may cause significant damage to the
1. rib cage
 2. lungs
 3. spleen
 4. liver
- 2-46. In one-rescuer CPR, the proper compression to ventilation ratio is
1. 15 to 2
 2. 2 to 15
 3. 1 to 5
 4. 5 to 1
- 2-47. The first step in preparing to perform CPR is to
1. check vital signs
 2. determine unconsciousness
 3. locate the sternum
 4. establish a patent airway
- 2-48. When performing CPR on an adult, the depth of compressions is
1. 0.5 to 1.0 inch
 2. 1.0 to 2.0 inches
 3. 1.5 to 2.0 inches
 4. 1.5 to 2.5 inches
- 2-49. An avulsion injury is a
1. traumatic removal of a limb
 2. piercing injury that closes over
 3. clean surgical cut
 4. traumatic removal of tissue
- 2-50. Blood that is bright red and flowing in a steady stream is probably
1. capillary
 2. from a deep vein
 3. from a deep artery
 4. from a surface vein
- 2-51. In most situations, the best and first method to control external hemorrhage is
1. direct pressure
 2. pressure point
 3. elevation
 4. tourniquet

- 2-52. A pressure point is a
1. nerve bundle that causes encruciating pain when pressure is applied
 2. point where the blood pressure drops low enough so that bleeding stops
 3. place where an artery is just below the skin surface over a bone
 4. major vein near a wound
- 2-53. The following information about pressure points is correct EXCEPT
1. pressure points are ideal when bleeding must be controlled for extended periods of time
 2. pressure is applied to the pressure point nearest to but proximal to the wound
 3. use of a pressure point and elevation can slow hemorrhage until a tourniquet can be applied
 4. use of a pressure point and elevation can slow hemorrhage until a direct pressure dressing can be applied
- 2-54. If one is applying a tourniquet to a traumatic amputation of the hand, the tourniquet is applied
1. just above the wrist
 2. just below the elbow
 3. just above the elbow
 4. across the biceps at the thickest part
- 2-55. If a tourniquet is used to control bleeding, you must
1. use narrow material so the band bites into the skin
 2. loosen the tourniquet every 15 minutes to allow blood flow
 3. tighten it only enough to stop arterial bleeding
 4. ensure both the wound and tourniquet are covered by dressings
- 2-56. Production of bright red blood during coughing is called
1. hematemesis
 2. hemoptysis
 3. hematochezia
 4. epistaxis
- 2-57. In treating patients with suspected internal injuries, prime consideration should be given to all of the following EXCEPT
1. oral fluids in all cases
 2. treating for shock
 3. supplemental oxygen therapy
 4. transporting to a medical facility as soon as possible
- 2-58. When possible, a roller bandage applied around a limb should begin
1. over the compress
 2. proximal to the compress
 3. on the narrowest part of the extremity
 4. on the thickest part of the extremity
- 2-59. A Barton bandage may be used to
1. support a fractured mandible
 2. hold a chest compress in place
 3. make a triangular bandage
 4. control a severe nose bleed (epistaxis)
- 2-60. Rabies is a viral disease
1. found only in household pets
 2. usually fatal
 3. treatable with standard antibiotics
 4. transmittable only through animal bites
- 2-61. Any animal bite wound should be
1. cauterized to prevent infection
 2. closed with nylon sutures
 3. cleaned with standard antiseptics
 4. cleaned with soap and water
- 2-62. To grow and multiply, anaerobic bacteria require
1. hemolytic action
 2. increased levels of oxygen
 3. normal levels of oxygen
 4. absence of oxygen

- 2-63. The body's physiologic response to an irritation or inflammation is characterized by
1. redness, warmth, and swelling
 2. redness, coolness, and discomfort
 3. blanching, coolness, and swelling
 4. none of the above
- 2-64. A single pus-filled cavity in the true skin of the nape of the neck would be classified as a
1. carbuncle
 2. furuncle
 3. lymph node
 4. none of the above
- 2-65. The appropriate treatment for a metal splinter embedded in the left eye is to
1. remove the foreign body with sterile forceps
 2. remove the foreign body with a dry cotton swab
 3. patch the left eye and transport to a medical treatment facility
 4. patch both eyes and transport to a medical treatment facility
- 2-66. Appropriate treatment for a sucking chest wound includes all of the following EXCEPT
1. giving oral fluids
 - a. administering oxygen therapy
 3. treating for shock
 4. placing the victim on the injured side
- 2-67. Appropriate treatment for a protruding abdominal wound includes
1. giving oral fluids
 2. replacing the intestines into the abdominal cavity
 3. applying a dry sterile compress
 4. treating for shock
- 2-68. When a medical officer may not be available for several days, a corpsman may attempt to close
1. wounds with minimal signs of infection
 2. puncture wounds
 3. wounds involving tendons and ligaments
 4. none of the above
- 2-69. An alternate name for an absorbable suture material is
1. dermalon
 2. gut
 3. silk
 4. nylon
- 2-70. Local anesthetics with epinephrine may be used
1. when suturing fingers or toes
 2. for nerve blocks
 3. on hypertensive patients
 4. on diabetic patients
- 2-71. The physiologic results of shock include
1. increased cardiac output
 2. hypoxia
 3. hyperperfusion of organs
 4. increased urine output
- 2-72. The signs and symptoms of shock include
1. hot and dry skin, dilated pupils, weak and rapid pulse
 2. hot and dry skin, constricted pupils, strong and rapid pulse
 3. cool and moist skin, dilated pupils, weak and rapid pulse
 4. cool and moist skin, constricted pupils, strong and rapid pulse
- 2-73. Oligemic shock is another name for
1. cardiogenic shock
 2. neurogenic shock
 3. septic shock
 4. hypovolemic shock

2-74. An oral electrolyte solution can be made from a liter of water and

1. 1.0 teaspoon of sugar + 0.5 teaspoon of baking powder
2. 0.5 teaspoon sugar + 1.0 teaspoon baking powder
3. 1.0 teaspoon salt + 0.5 teaspoon baking soda
4. 0.5 teaspoon salt + 1.0 teaspoon baking soda

2-75. Contraindications for the use of Medical Anti-Shock Trousers (MAST) includes

1. pelvis fracture
2. pulmonary edema
3. fractured femur
4. depressed skull fracture

Assignment 3

First Aid and Emergency Procedures (continued) : Patient Care

Textbook Assignment Pages 4-49 through 5-4

- 3-1. Medical Anti-Shock Trousers (MAST) are removed from a patient
 - 1. when blood pressure reaches 100 mm Hg systolic
 - 2. when intravenous fluids are started
 - 3. in a medical treatment facility under a medical officer's supervision only
 - 4. when the patient is in the ambulance and stabilized
- 3-2. Treatment for shock may include all of the following except
 - 1. opening and maintaining an airway
 - 2. oxygen therapy
 - 3. intravenous fluid therapy
 - 4. keeping the victim cool
- 3-3. Morphine is an acceptable analgesic in patients with
 - 1. head injuries
 - 2. profound respiratory distress
 - 3. advanced shock
 - 4. painful skin burns
- 3-4. The primary reason for splinting fractures is to
 - 1. prevent further injury
 - 2. control hemorrhage
 - 3. reduce swelling
 - 4. increase blood circulation
- 3-5. A splint should be long enough to reach
 - 1. from the fracture to the joint below the fracture
 - 2. from the fracture to the joint above the fracture
 - 3. past the joints above and below the fracture
 - 4. length is immaterial
- 3-6. To fit well and provide adequate immobilization, a splint must be
 - 1. well padded at body contact areas
 - 2. twice as wide as the injured limb
 - 3. strong, rigid, and applied tightly
 - 4. applied by two people
- 3-7. After applying a splint to a fractured forearm, you notice the fingers develop a bluish tinge and are cool to touch. you should
 - 1. elevate the arm
 - 2. apply warm compresses
 - 3. loosen the splint
 - 4. remove the splint
- 3-8. The proper first aid treatment for a fracture of the humerus near the shoulder is to
 - 1. apply a splint to the outside and one to the inside of the upper arm, bandage the arm to the body and support the forearm in a sling
 - 2. apply a splint to the outside of the arm, bandage the arm to the body, and support the forearm in a sling
 - 3. place a pad or folded towel in the armpit, bandage the arm to the body, and support the forearm in a sling
 - 4. splint the arm in the position you find it and bandage the arm securely to the body
- 3-9. When applying a splint to immobilize a fractured patella, place extra padding
 - 1. around the knee and under the buttocks
 - 2. under the knee and above the heel
 - 3. under the knee and under the thigh
 - 4. around the knee and under the calf

- 3-10. Fractured ribs should be treated by
1. applying adhesive tape around the chest to immobilize
 2. securing the arm on the injured side to the chest using a sling and swathe
 3. giving oxygen therapy and deep breathing exercises
 4. no treatment is necessary
- 3-11. The most important consideration in treating a mandibular fracture is
1. immediate immobilization
 2. ensuring a patent airway
 3. realignment of the jaw
 4. control of pain
- 3-12. In any head injury, it is important to
1. determine if the skull is fractured
 2. assume cervical spine damage
 3. administer pain medication
 4. remove impaled objects
- 3-13. When transporting a victim with a suspected spinal fracture,
1. ensure immobilization on a rigid backboard
 2. place a pillow or adequate padding under the neck
 3. transport in the shock position
 4. do all of the above
- 3-14. A deformity at a joint with pain, discoloration, and immobility are characteristic symptoms of a
1. dislocation
 2. simple fracture
 3. compound fracture
 4. displaced fracture
- 3-15. The most frequent sites of dislocated joints are the
1. sternal ribs, finger and jaw
 2. knee, hip, and elbow
 3. knee, hip, shoulder and jaw
 4. hip, shoulder, fingers, and jaw
- 3-16. In general, contusions, sprains, and dislocations are injuries to
1. joints and muscles
 2. nerves and blood vessels
 3. bones and blood vessels
 4. bones and nerves
- 3-17. To reduce a dislocated jaw,
1. pull the chin forward and down
 2. have the victim open his or her mouth several times to affect reduction
 3. grasp behind the front teeth and pull forward
 4. press down behind the last molars and lift the chin
- 3-18. The treatment for strains and sprains includes all of the following EXCEPT
1. radiographic evaluation
 2. immediate application of moist heat
 3. immobilization and rest
 4. elevation
- 3-19. With a suspected poisoning victim, it is important to determine, if possible, all of the following EXCEPT
1. name of the poison
 2. manufacturer of the poison
 3. quantity of the poison
 4. time of the poisoning
- 3-20. To obtain information on the antidote and treatment modality for a known poison, the first place you should call is the
1. local office of the Public Health Service
 2. nearest poison control center
 3. nearest physician
 4. manufacturer of the material
- 3-21. For a corpsman, the method of choice for inducing vomiting is
1. 3 teaspoonful of syrup of Ipecac
 2. 2 teaspoonful of dry mustard in water
 3. 2 teaspoonful of an activated charcoal slurry
 4. to tickle the back of the victim's throat

- 3-22. Treatment of a victim who ingested a strong acid includes intravenous infusion therapy and
1. inducing vomiting
 2. diluting the stomach contents with water
 3. neutralizing the stomach contents with a weak sodium bicarbonate solution
 4. gastric lavage
- 3-23. The most likely area of damage in a victim who ingested a strong alkali is the
1. stomach
 2. esophagus
 3. liver
 4. colon
- 3-24. Unless directed otherwise, the treatment of a victim who ingested turpentine is to
1. induce vomiting and observation
 2. give 1 to 2 ounces of vegetable oil orally
 3. neutralize with vinegar and water
 4. give 1 to 2 tablespoonful of milk of magnesia
- 3-25. Chemical or aspiration pneumonia is a serious threat in ingestion of
1. acid compounds
 2. alkali compounds
 3. petroleum distillates
 4. any of the above
- 3-26. The most common agent in inhalation poisoning is
1. carbon dioxide
 2. carbon monoxide
 3. freon
 4. none of the above
- 3-27. Treatment for an inhalation poisoning victim Includes all of the following EXCEPT
1. removal from the contaminated atmosphere
 2. administration of oxygen
 3. administration of stimulants
 4. treatment for shock
- 3-28. An anaphylactic reaction to a bee or wasp sting is treated by all of the following EXCEPT
1. removal of jewelry
 2. a subcuticular injection of epinephrine
 3. warm packs over the sting site
 4. removing the stinger by scraping with a dull knife
- 3-29. Pharmaceutical preparations that may NOT be given to a scorpion sting victim include
1. demerol or morphine
 2. calcium gluconate
 3. valium
 4. all the above are acceptable
- 3-30. Symptoms of a black widow spider bite may include severe pain, dyspnea, and
1. hypotension
 2. abdominal tetany
 3. a necrotizing lesion
 4. fever and chills
- 3-31. Excision and corticosteroid therapy is early treatment for
1. scorpion bites
 2. black widow spider bites
 3. brown recluse spider bites
 4. snake bites
- 3-32. The key identifying feature of the coral snake that distinguishes it from other snakes with similar markings is the
1. yellow band is always next to the red band
 2. red band is always next to the black band
 3. distinctive bite pattern
 4. deep pits below the eyes
- 3-33. On patrol, a member of your unit receives a rattlesnake bite just below the elbow. First aid treatment includes
1. placing a tourniquet 2 inches proximal to the bite site
 2. placing a constricting band 2 inches proximal to the bite site above the elbow
 3. placing a constricting band 2 inches distal to the bite site below the elbow
 4. doing both 2 and 3 above

3-34. Jelly fish nematocysts can be neutralized with

1. formalin
2. dilute ammonia
3. vinegar
4. any of the above

3-35. The most widely abused drug(s) is/are

1. ethanol
2. opiates
3. barbituratee
4. amphetamines

3-36. Signs and symptoms of stimulant intoxication include all of the following EXCEPT

1. hyperactivity
2. increased appetite
3. dilated pupils
4. increased body temperature

3-37. Marijuana is classified as a _____ drug.

1. barbiturate
2. physically addicting
3. hallucinogen
4. harmless

To answer questions 3-36 through 3-40, use the "Rule of Nines" to determine the extent of injury by body surface area and select the most appropriate answer from the below insert.

1. 18 percent
2. 27 percent
3. 31.5 percent
4. 36 percent

3-38. A steam burn to the face, chest, and both arms.

3-39. A sunburn to the back of both legs, both arms, and the back.

3-40. A thermal burn to the left arm and front of the left leg.

3-41. First aid treatment for extensive second degree burns should include

1. anesthetic ointments and transport only
2. debridement of the wound and dry dressings
3. intravenous infusion and dry dressings
4. anesthetic ointments and analgesic

3-42. The treatment for chemical burns is flushing with copious amounts of water. The two exceptions to this rule are

1. phosphoric acid and lye
2. white phosphorus and carbolic acid
3. dry lime and carbolic acid
4. sulfuric acid and carbolic acid

3-43. Alkali burns to the skin can be neutralized with a dilute solution of

1. alcohol
2. phenol
3. vinegar
4. baking soda

3-44. First aid treatment of white phosphorus burns with embedded particles includes

1. wet dressings of copper sulfate
2. superficial debridement while flushing with water
3. neutralization with a dilute vinegar solution
4. neutralization with a dilute solution of baking soda

3-45. Signs and symptoms of heat exhaustion include a weak rapid pulse, nausea, headache, and

1. constricted pupils
2. greatly increased body temperature
3. cool, moist, and clammy skin
4. flushed, red face

3-46. First aid treatment of heat stroke is centered on

1. prevention of seizure and coma
2. administering stimulants
3. fluid replacement
4. reducing body heat

3-47. The incidence of heat exposure injuries can be minimized by all of the following EXCEPT

1. education of personnel
2. environmental monitoring
3. daily salt tablets
4. maintenance of exhaust blowers and vents

- 3-48. The most effective method of rewarming a victim of hypothermia is
1. "buddy warming"
 2. covering the victim with blankets or a sleeping bag
 3. hot water bottles at the neck, armpits, groin, and the chest
 4. immersion in a tub of warm water
- 3-49. An antiseptic emollient cream should be applied to which, if any, of the following cold injuries?
1. Chilblain
 2. Immersion foot
 3. All frostbites
 4. None of the above. Cold injuries should be kept dry.
- 3-50. For which, if any, of the following reasons should a frostbite injury remain frozen?
1. To minimize the severity of pain
 2. When there is the possibility of refreezing
 3. To prevent shock
 4. Never. Frostbite should always be rewarmed as quickly as possible.
- 3-51. Reversal of a syncopal episode can often be accomplished by
1. sitting with the head between the knees
 2. sitting upright
 3. lying down with the head and shoulders slightly elevated
 4. lying down in the reverse shock position
- 3-52. The quickest and easiest way to determine if an unconscious person is a diabetic is to
1. check for signs of ketoacidosis
 2. determine blood sugar levels
 3. search for signs of insulin use
 4. search for a Medic Alert tag, bracelet, or card
- 3-53. The immediate treatment for insulin shock is to
1. administer an injection of insulin
 2. place sugar under the victim's tongue
 3. start an intravenous solution of normal saline
 4. administer oxygen
- 3-54. In addition to monitoring vital signs and making the patient comfortable, treatment for a stroke includes
1. administering analgesics to relieve pain
 2. giving oxygen therapy
 3. giving a rapid infusion of a 5 percent dextrose solution
 4. giving a 0.3cc injection of epinephrine for vasoconstriction
- 3-55. Initial first aid treatment for an attack of angina pectoris includes reassurance, monitoring of vital signs, and
1. initiating CPR
 2. giving sublingual nitroglycerin
 3. advise the patient to return to duty when pain abates
 4. giving a 0.3cc of epinephrine IM to increase heart rate
- 3-56. First aid treatment for an acute myocardial infarction without cardiac arrest includes all of the following EXCEPT
1. giving oxygen therapy
 2. monitoring vital signs
 3. starting an intravenous infusion of only normal saline
 4. transporting to a medical treatment facility
- 3-57. First aid treatment for a patient suffering a convulsive seizure episode consists of
1. protecting the victim from injury
 2. immediately starting CPR
 3. muscle massage during periods of rigidity
 4. injecting 75 to 100 mg of demerol IM to effect relaxation

- 3-58. The most common psychiatric emergency is probably the suicide gesture or attempt. Basic treatment consists of all of the following EXCEPT
1. a calm and understanding presence
 2. leaving the victim alone to reflect on his or her actions
 3. assuming all suicide threats are real
 4. treating self-inflicted wounds as any other wound
- 3-56. During childbirth, when the baby's head presents, apply gentle pressure to
1. prevent an explosive delivery
 2. avoid compressing the umbilical cord
 3. compress the cord to stimulate the infants vital functions
 4. allow you time to suction the mouth and nose of the infant
- 3-60. The infant's mouth and nose should be suctioned
1. if spontaneous respirations do not occur
 2. when the chin clears the vaginal canal
 3. after the child has completely emerged
 4. after clamping and cutting the umbilical cord
- 3-61. Emergency first aid treatment for a prolapsed cord during childbirth includes all of the following EXCEPT
1. decompressing the cord as much as possible
 2. giving oxygen therapy
 3. placing the mother in the shock position
 4. clamping and cutting the umbilical cord when it presents
- 3-62. The oxygen breathing apparatus (OBA) is a valuable adjunct in rescue operations because it
1. can be connected directly to an external air source
 2. provides positive pressure ventilation for the wearer
 3. neutralizes or filters toxic gasses
 4. generates its own oxygen
- 3-63. When should an oxygen source be connected to an air line mask?
1. When entering a carbon dioxide filled compartment or void
 2. When entering a compartment or void with fuel oil vapors
 3. After the couplings have been cleaned of all oil or grease
 4. An air line mask should never be connected to an oxygen source
- 3-64. The standard gas mask provides effective protection against
1. carbon monoxide and carbon dioxide
 2. low oxygen concentration
 3. both 1 and 2 above
 4. chemical and biological warfare agents
- 3-65. A protective asbestos suit protects the wearer
1. in steam filled compartment
 2. against brief exposure to flame
 3. from being scalded
 4. during prolonged exposure to heat
- 3-66. When using a life-line to raise an unconscious person from a compartment, attach the life-line around
1. the waist and to the belt
 2. the chest and under the arms
 3. the hips and the wrists
 4. the arms and legs
- 3-67. The most practical stretcher to use when lifting a casualty from an engine room is a/an
1. Stokes stretcher
 2. Army litter
 3. Neil Robertson stretcher
 4. Improvised blanket and line stretcher
- 3-68. Probably the easiest way to carry an unconscious person is the
1. fireman's carry
 2. tied-hands crawl
 3. blanket drag
 4. chair carry

- 3-69. The tied-hands crawl is the most useful when the victim
1. in too heavy to lift
 2. must be moved long distances
 3. in seriously injured
 4. must be moved under low structures
- 3-70. The most distinct advantage of the chair carry is
1. the ease of transporting heavy casualties
 2. the ease of negotiating stairs
 3. its safety in transporting neck or back injuries
 4. its safety in transporting pelvic injuries
- 3-71. The concepts of health include
1. the absence of disease or debility
 2. soundness of mind, body, and spirit
 3. a feeling of euphoria
 4. both 1 and 2 above
- To answer question 3-72, use the following information.
- a. Physicians and nurses
 - b. Corpsmen
 - c. Allied health care providers
 - d. The patient
- 3-72. The health care team is comprised of
1. a and b only
 2. b, and c only
 3. b, and d only
 4. a, b, c, and d
- 3-73. Patient rights and responsibilities are standards addressed by the
1. Commander, Naval Medical Command (formerly Bureau of Medicine and Surgery)
 2. American Medical Association (AMA)
 3. Joint Commission on Accreditation of Hospitals (JCAH)
 4. National League of Nursing (NLN)
- 3-74. A patient who is a professed atheist is placed on the very Serious List (VSL) with a poor prognosis for recovery. All of the following actions by the staff are considered appropriate and ethical EXCEPT
1. informing the rest of the staff of the patient's nonreligious beliefs
 2. informing the rest of the staff of the patient's condition
 3. informing pastoral services (chaplain) of the patient's condition and nonreligious beliefs
 4. attempting to convince the patient to accept a religious belief
- 3-75. The communication process takes place only through the written or spoken word.
1. True
 2. False

Assignment 4

Patient Care (continued) : Clinical Laboratory

Textbook Assignment: Pages 5-3 through 6-4

To answer questions 4-1 through 4-3, select from column B the statement that most accurately describes the term in column A.

<u>A. Terms</u>	<u>B. Descriptive Statement</u>
4-1. Interpersonal relations	1. Learned and shared behavior patterns and standards
4-2. Culture	2. How one responds to and regards others
4-3. Race	3. Inherited characteristics
4-4. Communication barriers inhibit the flow of information or promote misunderstanding and may consist of all the following EXCEPT	
1. decreased auditory acuity	
2. political affiliation	
3. age	
4. education	
4-5. The most common cause of ineffective communication and the most difficult obstacle to identify is the _____ barrier.	
1. physiological	
2. physical	
3. psychosocial	
4. spiritual or religious	
4-6. In the communication process, listening is a critical skill and can be improved by developing all of the following attitudes and behaviors EXCEPT	
1. minimizing distractions	
2. anticipating what the patient will say	
3. wanting to listen	
4. concentrating	

To answer questions 4-7 through 4-10, select from column B the term that most aptly applies to the event in column A.

<u>A. Events</u>	<u>B. Terms</u>
4-7. Developing a patient's history of a complaint	1. Contact point communication
4-8. Explaining the necessities and methods of personal hygiene to the parent of a young patient	2. Therapeutic communication
4-9. Providing self-care instructions to a patient released to convalescent leave	
4-10. Directing the patient to the pharmacy to fill a prescription	
4-11. The purposes of therapeutic communication includes all of the following EXCEPT	
1. assessing behavior and modifying if appropriate	
2. educating a patient regarding health and health care	
3. providing information on how to get to the appropriate clinic for treatment	
4. obtaining information to determine a patient's illness	
4-12. The medical treatment for an inpatient in a naval hospital is prescribed by	
1. the director of clinical services	
2. the clinical coordinator	
3. a medical officer	
4. a physician assistant	

Subjective and objective observations are essential elements in assessing an individual's health status. To answer questions 4-13 through 4-17, select from the kind(s) of observation listed below the observation that best fits the scenario described.

Kind(s) of observation(s)

1. Subjective only
2. Objective only
3. Both 1 and 2 above

- 4-13. In the emergency room, you are examining a patient who suddenly vomits and tells you he has been feeling nauseous for the past several hours
- 4-14. A patient claims to have swallowed many pills and complains of sleepiness and nausea
- 4-15. A patient complains of chest pain and difficulty breathing
- 4-16. On the above patient, an EKG is interpreted as normal and breathing appears better with oxygen therapy
- 4-17. When picking up a patient's dinner tray you notice that only the liquids have been consumed but the patient has normally been eating a full meal.
- 4-18. Reporting consists of oral or written communication. The patient's clinical record is the written report and serves the primary purpose of providing
 1. a subjective evaluation of the patients case
 2. medicolegal documentation in cases of malpractice
 3. a chronological record of care and the patient's response to treatment
 4. information for statistical analysis
- 4-19. When making a clinical record entry regarding a patient's pain, you should record which of the following elements?
 1. Location
 2. Quality
 3. Severity
 4. All of the above
- 4-20. Patient education is the responsibility of
 1. the members of the command education and training department
 2. only the physician and nurses for the patient
 3. all members of the health care team
 4. the outpatient staff and clinic supervisor only
- 4-21. The goals of patient health education include
 1. promoting patient self-care
 2. promoting behavior modification
 3. influencing a patient's attitude toward health and disease
 4. all of the above
- 4-22. The limitation imposed upon a health care provider are based on local regulations and
 1. occupational standards
 2. rate training manuals
 3. training and experience
 4. all of the above
- 4-23. In the health care field, accountability means that providers
 1. are held responsible for their actions
 2. must continue their education in the health care field
 3. are bound by a code of ethics
 4. all the above

- 4-24. Electrical and electronic equipment pose significant injury hazards. Authorized means to reduce this hazard include
1. repairing frayed cords with electrical tape to prevent shocks
 2. informing the staff of defective equipment
 3. having medical repair perform electrical safety checks on all new equipment
 4. using only two-prong, nongrounded electrical plugs
- 4-25. Skin contact burns can be caused by icebags or hypothermia blankets.
1. True
 2. False
- 4-26. One of the most frequent causes of fire is the careless handling of tobacco products. To serve as an effective safety measure, smoking regulations must be enforced by which staff personnel?
1. Hospital security
 2. Director of Administrative Services
 3. Area supervisors
 4. All staff personnel
- 4-27. Documentation and analysis of all accidents and injuries is provided to
1. forestall negligence or malpractice suits
 2. identify and punish the responsible person(s)
 3. identify and correct safety deficiencies
 4. all of the above
- 4-28. Environmental hygiene is directed toward producing a healthy environment and includes such practices as maintaining unit cleanliness and
1. providing for adequate ventilation
 2. limiting noise levels
 3. proper disposal of soiled articles
 4. all of the above

To answer items 4-29 through 4-32, select from column B the situational element that most closely matches the chain of infection link in column A as it applies to the following scenario.

A corpsman assists a medical officer to perform incision and drainage of a furuncle on a patient's leg. After the I&D procedure, the corpsman changes a postsurgical abdominal dressing on the same patient. A few days later, the surgical wound appears red and swollen and a culture reveals a significant staphylococcal infection.

	A. Chain of Infection Links	B. Situational Elements
4-29. Reservoir of the infectious agent		1. Corpsmen's hands
4-30. Mode of transmission		2. Patient
4-31. Portal of entry		3. Abdominal wound
4-32. Susceptible host		4. Furuncle
4-33. One essential practice of medical asepsis is washing your hands before and after changing a Patient's dressing.	1. True 2. False	
4-34. Minimizing the spread of an infectious disease can be accomplished by the use of isolation techniques that may include	1. limiting patient contact 2. establishing physical barriers 3. concurrent and terminal disinfection 4. all of the above	
4-35. The sterilization method of choice for most articles used in surgery is	1. dry heat 2. steam under pressure 3. ethylene oxide gas 4. soaking in glutaraldehyde	

- 4-36. An important step in using ethylene oxide gas for sterilization is
1. providing protective masks to the operators
 2. providing an aeration period
 3. including surgical blades and sutures in the pack
 4. ensuring adequate steam pressure in the chamber
- 4-37. Sterilization of individual strands of suture is acceptable for
1. all absorbable suture material
 2. all nonabsorbable suture material
 3. stainless steel sutures only
 4. both 1 and 2 above
- 4-38. Which of the following rubber products may be desterilized after use?
1. Disposable surgeon's gloves
 2. Latex surgical drains
 3. Surgical suction tubing
 4. Disposable urinary catheters
- 4-39. While adding items to a sterile you think you may have dragged the corner of a wrapper across part of the field. Your course of action should be to
1. do nothing. Wrappers are considered clean.
 2. tell the scrub technician so he or she can avoid that part of the field
 3. say nothing and continue with what you were doing
 4. dismantle the field and set up a new field
- 4-40. While netting up a minor surgery case, you notice that the instrument pack is outdated. You should
1. unwrap, inspect, and resterilize if usable.
 2. desterilize without unwrapping
 3. return it to the shelf and let someone else take care of it.
 4. use the pack since only the outside is not sterile.

- 4-41. The surgical hand scrub is performed to
1. chemically sterilize the hands and forearms.
 2. remove all bacteria from the hands and forearms.
 3. reduce bacteria to a minimum on the hands and forearms.
 4. remove obvious dirt and grime from the hands and forearms.
- 4-42. Transient and resident bacteria are easily removed from the skin by the friction created during the surgical hand scrub.
1. True
 2. False
- 4-43. Because of its nonstatic qualities, the most acceptable material for use in the operating room is
1. wool
 2. synthetic fabrics.
 3. untreated synthetic/cotton blends
 4. 100 percent cotton.

To answer questions 4-44 through 4-49, select from column B the nutritive substance that most appropriately corresponds to the functional statement in column A.

	A. Functional Statements	B. Nutritive Substances
4-44.	Required for tissue building	1. Fats 2. Carbohydrates 3. Proteins
4-45.	The most concentrated source of energy	4. Vitamins
4-46.	The most efficient source of energy	
4-47.	Essential for conversion of nutritive substances into energy	
4-48.	May be stored in the liver as glycogen	
4-49.	Do NOT serve as an energy source	

- 4-50 A diet adequate in fats, carbohydrates, proteins, and vitamins will always contain an adequate amount of minerals.
1. True
 2. False

- 4-51. All metabolic chemical reactions in the body take place in which medium?
1. Minerals
 2. Vitamins
 3. Blood
 4. Water

To answer questions 4-52 through 4-54, select from the basic four food groups below, the group(s) that most correctly applies.

- a. Grain group
- b. Meat group
- c. Milk group
- d. Vegetable/fruit group

- 4-52. A major source of roughage for the body is provided by
1. a
 2. b
 3. c
 4. d

- 4-53. A major source of protein and B-complex vitamins is
1. a
 2. b
 3. c
 4. d

- 4-54. Nearly all the body's vitamin requirements are provided in
1. a
 2. b
 3. c
 4. d

- 4-55. The treatment regimen for a medical inpatient will generally consist of all of the following EXCEPT
1. patient education
 2. diet therapy
 3. surgical asepsis
 4. rest

- 4-56. Therapeutic bed rest is prescribed for a medical patient primarily to
1. inhibit the development of circulatory problems
 2. prevent depression and apathy
 3. prevent further damage to body systems
 4. inhibit the development of respiratory problems

- 4-57. A health care provider can reasonably expect that all patients admitted for surgical procedures will
1. be very demanding
 2. be apathetic and passive
 3. exhibit violent behavior
 4. be fearful and anxious

- 4-58. SF 522, Request for Administration of Anesthesia and for Performance of Operations and Other Procedures is normally signed by a parent, legal guardian, or spouse EXCEPT when the patient is
1. unable to do so
 2. over 16 years of age but under 18
 3. over 18 years of age but under 21
 4. a member of the Armed Forces

- 4-59. Regional anesthetics affect a patient's
1. motor, but not sensory perception
 2. specific body part
 3. level of consciousness
 4. entire body

- 4-60. In general anesthesia, a stimulation of vital signs is evidence of a _____ level of anesthesia induction.
1. stage 1
 2. stage 2
 3. stage 3
 4. stage 4

- 4-61 Dropping a metal basin on the operating room floor may cause a violent response from a general anesthesia patient in
1. stage 1
 2. stage 2
 3. stage 3
 4. stage 4

- 4-62. In the immediate postoperative recovery phase, a patient's skin color may be indicative of all of the following EXCEPT
1. the patient's ability to recover from the anesthetic agent
 2. postoperative hemorrhage
 3. degradation of respiratory function
 4. the development of shock
- 4-63. When permitted, postoperative patients should be encouraged to ambulate to improve the functions of which of the following physiologic systems?
1. Renal system
 2. Digestive system
 3. Cardiopulmonary system
 4. All of the above
- 4-64. When caring for a young, otherwise healthy orthopaedic patient requiring immobilization, the health care provider can anticipate all of the following EXCEPT
1. symptoms of emotional stress
 2. frequent complaints of sore or aching pain
 3. periods of dizziness associated with disorientation
 4. a deterioration of skin tone and function
- 4-65. Unless otherwise directed by the physician, when one is applying a cast to an arm, the patient's wrist generally is
1. extended about 10 degrees
 2. in the neutral position
 3. flexed about 30 degrees
 4. in any of the above. Specific position is immaterial.
- 4-66. In the theory of death and dying, it is suggested that most people exhibit five stages. The stage where the terminal patient becomes concerned about the state of his or her affairs and family members is known as the stage of
1. denial
 2. acceptance
 3. bargaining
 4. depression
- 4-67. For most clinical examinations, the blood specimen is obtained
1. by venipuncture
 2. by finger puncture
 3. from an artery
 4. from none of the above
- 4-68. Using the steps below, determine the correct method for obtaining blood by finger puncture.
- a. Clean finger
 - b. Lance finger
 - c. Milk finger
 - d. Collect specimen
 - e. Wipe away first drop
1. a, b, c, e, d
 2. c, b, e, a, d
 3. a, c, b, e, d
 4. c, a, b, e, d
- 4-69. When performing a finger puncture, wipe the first drop away to avoid.
1. bacterial contamination
 2. clotting at the puncture site
 3. dilution of the specimen with alcohol
 4. dilution of the specimen with tissue fluids
- 4-70. How would a 5 ml blood specimen be obtained from a patient with an intravenous antibiotic being given through the left arm and blood being received through the right arm?
1. Multiple finger punctures
 2. Left arm
 3. Right arm
 4. Foot
- 4-71. A tourniquet applied to the arm during venipuncture should provide enough tension to compress the artery, but not the vein.
1. True
 2. False
- 4-72. The correct needle position for venipuncture is a _____ degree angle with the bevel _____
1. 30, up
 2. 15, up
 3. 30, down
 4. 15, down

- 4-73. The tourniquet applied prior to venipuncture is removed
1. just prior to needle insertion
 2. just after needle insertion, but prior to vacutainer activation
 3. after all specimens have been collected
 4. after needle removal
- 4-74. The part of the microscope on which the prepared specimen is placed for examination is called the
1. arm
 2. base
 3. frame
 4. stage
- 4-75. The total magnification available by using the lens color coded red is
1. 1000X
 2. 450X
 3. 100X
 4. 10X

Assignment 5

Clinical Laboratory (continued) : Pharmacology and Toxicology

Textbook Assignment: pages 6-5 through 7-13

- 5-1. What objective should be used for a detailed study of stained bacterial smears?
1. Low power
 2. High dry
 3. Oil immersion
 4. Either 2 or 3 above
- 5-2. If necessary, which, if any, of the following substances may be used for cleaning the lenses on a microscope?
1. Alcohol
 2. Bleach
 3. Xylol
 4. None of the above
- 5-3. A CBC includes which of the following?
1. Total RBC count
 2. Hematocrit
 3. Differential WBC count
 4. All of the above
- 5-4. Which of the following RBC counts is ABNORMAL for an adult male?
1. 4.8 million/mm³
 2. 5.3 million/mm³
 3. 5.6 million/mm³
 4. 6.3 million/mm³
- 5-5. A subnormal RBC count may indicate that the patient has
1. leukopenia
 2. anemia
 3. leukemia
 4. uremia
- 5-6. When drawing blood for an RBC count, fill the pipette to the _____ mark.
1. 0.05
 2. 0.3
 3. 11.0
 4. 101.0
- 5-7. Which procedure(s) is/are important in the use of the pipette so that a good blood specimen may be obtained for an RBC count?
1. The pipette should be held in a nearly horizontal position while filling so that the exact height of the blood column can be seen.
 2. The curve of the tip of the pipette may rest against the skin, but the orifice must be free.
 3. The orifice of the pipette must be kept immersed in the blood to prevent air bubbles from being drawn in.
 4. All of the above procedures are important.
- 5-8. If too much blood is drawn into the pipette during the RBC count, withdraw the excess by touching the tip of the pipette to
1. a gauze pad
 2. a cotton ball
 3. the skin
 4. a metal surface
- 5-9. Which of the following conditions indicates that the counting chamber is properly loaded?
1. There is a thin, even film of fluid under the coverglass
 2. The fluid flows into the grooves at the edges of the chamber.
 3. Air bubbles are seen in the field.
 4. The chamber is flooded.
- 5-10. What objective should be used for counting RBCs?
1. Low power
 2. High power
 3. Oil immersion
 4. High dry

- 5-11. When counting cells, to arrive at a correct count, the cells touching the lines on the _____ and _____ are counted in addition to all cells totally within each square.
1. left, top
 2. right, bottom
 3. right, top
 4. right, bottom
- 5-12. To arrive at the number of RBCs per mm³ total the number of cells counted in all five fields and multiply by
1. 5
 2. 50
 3. 10,000
 4. 50,000
- 5-13. The standard Sahli-Hellige hemacytometer used in the Navy equates a 100 percent reading to _____ grams of hemoglobin per 100 ml of blood.
1. 13.8
 2. 14.5
 3. 15.2
 4. 17.3
- 5-14. What is the term used for the volume of erythrocytes expressed as a percentage of the volume of whole blood in a sample?
1. Hematocrit
 2. Hemoglobin
 3. Red blood cell count
 4. Complete blood cell count
- 5-15. The hematocrit for a normal, healthy female is _____ percent.
1. 38 to 40
 2. 40 to 46
 3. 42 to 50
 4. 44 to 52
- 5-16. What is the term used to describe an abnormally low WBC count?
1. Leukocytosis
 2. Erythrocytosis
 3. Leukopenia
 4. Pancytopenia
- 5-17. A shift from leukocytosis to leukopenia in a patient with a systemic bacterial infection is a good sign.
1. True
 2. False
- 5-18. Both the number of squares and the counting procedure for WBCs is the same as it is for RBCs.
1. True
 2. False
- 5-19. To arrive at the number of white cells per mm³ of blood, total the number of cells counted in the four fields and multiply by
1. 0.5
 2. 5.0
 3. 50
 4. 5000
- 5-20. A differential blood count is a count of the percentage distribution of
1. lymphocytes
 2. monocytes
 3. leukocytes
 4. erythrocytes
- 5-21. The term used to describe an abnormally high WBC count is
1. leukocytosis
 2. erythrocytosis
 3. leukopenia
 4. pancytopenia
- 5-22. A continued shift to the left with a falling total ABC count probably indicates
1. progress toward normal recovery
 2. a decrease in immature neutrophils
 3. a breakdown of the body's defense mechanism and is a poor prognosis
 4. a decrease in parasitic and allergenic conditions

To answer items 5-23 through 5-26, select from column B the biologic condition that most appropriately corresponds to the leukocytic characteristic in column A.

	<u>A. Characteristic</u>	<u>B. Conditions</u>
5-23.	Increased eosinophils	1. Recovery
5-24.	Increased monocytes	2. Parasitic infection
5-25.	Decreased WBC count with increased Juvenile cells	3. Breakdown of the body's defense
5-26.	Decreased WBC count with Increased mature cells	4. Active tuberculosis
5-27.	After mixing, Wright's stain must be stored in a stoppered bottle in a dark place for a minimum of	1. 12 hours 2. 24 hours 3. 20 days 4. 30 days
5-28.	On a properly prepared slide for a differential count. the smear will	1. extend from one side of the slide to the other 2. be evenly distributed on the entire slide 3. show no wavy or blank spots 4. show smooth even edges
5-29.	Properly prepared differential slides require that exact timing be followed when staining the smear regardless of the stain batch.	1. True 2. False
5-30	When staining a smear with Wright's stain, the stain and buffer should be mixed until a _____ film appears.	1. silvery metallic 2. bluish-gray 3. coppery metallic 4. greenish-blue

- 5-31. What is the most common cause of poor results with Wright's stain?
1. Incorrect pH of the staining fluid
 2. Too much acid
 3. Incorrect time intervals
 4. Too much buffer

- 5-32. If a smear used in a differential count is to be saved for reexamination remove the immersion oil by placing a piece of lens tissue over the slide and moistening the tissue with
1. alcohol
 2. water
 3. xylol
 4. acetone

- 5-33. When viewing a smear for a differential count you identify the cells with the large scattered red, dark blue granules that are darker than their nuclei as
1. lymphocytes
 2. monocytes
 3. basophils
 4. neutrophils

- 5-34. The largest of the normal WBCs is the
1. monocyte
 2. lymphocyte
 3. eosinophil
 4. basophil

- 5-35. The best urine specimen is the _____ specimen.
1. first morning
 2. random
 3. fasting
 4. 24 hour

- 5-36. What is the action of toluene on a urine specimen?
1. It increases the albumin.
 2. It dissolves unwanted cells.
 3. It protects the specimen from air.
 4. It dissolves the albumin.

- 5-37. When thymol is used to preserve a urine sample, enough thymol may dissolve to produce false positives for
1. glucose
 2. protein
 3. ketones
 4. albumin

- 5-38. Which of the following colors would be considered abnormal in a urine specimen?
1. colorless
 2. amber
 3. straw
 4. red

To answer items 5-39 through 5-42, select from column B the most probable causative agent that would produce the urine color-in column A.

<u>A. Urine Colors</u>	<u>B. Agents</u>
------------------------	------------------

- | | |
|-------------------|-----------------|
| 5-39. Milky | 1. Pyridium |
| 5-40. Dark orange | 2. Bile |
| 5-41. Red-brown | 3. Blood |
| 5-42. Brown | 4. Fats (chyle) |
- 5-43. A report on urine transparency is valid regardless of standing time.
1. True
 2. False
- 5-44. The specific gravity of a liquid or solid is the weight of the substance as compared to an equal volume of
1. ethanol
 2. methanol
 3. distilled water
 4. normal saline
- 5-45. In the microscopic examination of urine sediment, scan the slide using the low power objective and examine it in detail using the ____ objective.
1. low power
 2. high dry
 3. high power
 4. oil immersion

- 5-46. The addition of one drop of 5 percent acetic acid to urine sediment will disintegrate
1. white blood cells
 2. mucous threads
 3. casts
 4. red blood cells

- 5-47. Pharmacology was formerly known by its Latin name
1. pharmacognoscy
 2. materia medica
 3. posology
 4. toxicology

- 5-48. The 'blue bible' of pharmacology is
1. the Physicians' Desk Reference
 2. The United States Pharmacopeia and National Formulary (USP-NF)
 3. the Pharmaceutical Basis of Therapeutics
 4. Remington's Pharmaceutical Sciences

- 5-49. The factor that most commonly influences the amount of drug given to a patient is
1. weight
 2. gender
 3. age
 4. route of administration

- 5-50. If the average adult dose of a suspension of ampicillin is 15 ml, the dose for an 8-year-old child is ____ ml.
1. 2
 2. 6
 3. 9
 4. 15

- 5-51. If the average adult dose of a medication is 600 mg, the dose for a child weighing 30 pounds is ---- mg.
1. 50
 2. 100
 3. 120
 4. 150

- 5-52. In computing the amount of drug to be given to an underweight female, what adjustments to the normal dosage would ordinarily be made?
1. Increase the dosage because of her weight and a further increase because of her sex.
 2. Increase of dosage because of her weight but a decrease because of her sex.
 3. Decrease of dosage because of her sex and a further decrease because of her weight.
 4. Decrease of dosage because of her sex but an, increase because of her weight.
- 5-53. A drug given repeatedly to a patient often has to be Increased in dosage to maintain the desired effect. The need for a larger dose is probably caused by
1. An acquired tolerance from habitual use
 2. an abnormal sensitivity
 3. a cumulative effect from habitual use
 4. an individual idiosyncrasy
- 5-54. The most common method of administering medications is
1. orally
 2. parenterally
 3. topically
 4. intravenously
- 5-55. The drug group most commonly used to treat dyspepsia is
1. emollients
 2. astringents
 3. antacids
 4. absorbents
- 5-56. In addition to being an antacid, magnesium hydroxide by be used as a/an
1. emollient
 2. laxative
 3. demulcent
 4. astringent
- 5-57. Aluminum acetate an astringent, is often used to treat
1. athlete's foot
 2. external otitis
 3. poison ivy
 4. any of the above
- 5-58. Which of the following is an ideal emollient to protect sensitive skin from the sun?
1. Theobroma oil
 2. Lanolin
 3. Zinc oxide ointment
 4. Aluminum acetate
- 5-59. Which of the following is a bronchomucotropic agent?
1. Petrolatum
 2. Guaifenesin
 3. Benzonatate
 4. Phenol
- 5-60. Agents that inhibit the growth of microorganisms without necessarily killing them are known as
1. germicides
 2. fungicides
 3. antiseptics
 4. astringents
- 5-61. The standard by which all other antiseptics is measured is
1. betadine
 2. phenol
 3. isopropyl alcohol
 4. hexachlorophene
- 5-62. An accidental spill of phenol can be neutralized by
1. water
 2. silver nitrate
 3. hydrogen peroxide
 4. alcohol
- 5-63. The primary pharmacological action of sulfonamides is
1. viricidal
 2. bacteriostatic
 3. parasitocidal
 4. fungistatic
- 5-64. Supplemental therapy for most systemic sulfonamides is
1. forcing fluids and/or sodium bicarbonate
 2. forcing fluids and/or magnesium citrate
 3. forcing fluids and/or oral tranquilizers
 4. oral tranquilizers and/or mildly acidic solutions

- 5-65. The most common use for systemic sulfonamides is in the treatment of
1. respiratory infections
 2. urinary tract infections
 3. viral infections
 4. furunculosis
- 5-66. Silver sulfadiazine is used almost exclusively in the treatment of
1. surgical wound sepsis
 2. burns
 3. prostatitis
 4. furunculosis
- 5-67. Penicillin is effective in the treatment of all of the following EXCEPT
1. syphilis
 2. typhoid
 3. anthrax
 4. gonorrhea
- 5-68. Which of the following is for parenteral administration only?
1. Dicloxicillin
 2. Phenoxymethyl penicillin
 3. Methicillin sodium
 4. Ampicillin
- 5-69. The drug of choice for uncomplicated group A beta-hemolytic streptococcal pharyngitis is
1. Penicillin V potassium
 2. Nafcillin
 3. Ampicillin
 4. Dicloxicillin
- 5-70. Patients sensitive to penicillin may also exhibit sensitivity to cephalosporine.
1. True
 2. False
- 5-71. Milk or milk products may interfere with the absorption of which of the following drugs?
1. Cephalexin (Keflex)
 2. Tetracycline hydrochloride
 3. Streptomycin sulfate
 4. Erythromycin
- 5-72. Which of the following conditions may be an adverse side effect of neomycin sulfate?
1. Blood dyscrasias
 2. Deafness
 3. Diarrhea
 4. Constipation
- 5-73. Severe colitic and diarrhea may be adverse side effects of which of the following?
1. Neomycin sulfate
 2. Gentamycin sulfate
 3. Penicillin G benzathene
 4. Clindamycin hydrochloride
- 5-74. All of the following are anti-tuberculosis agents EXCEPT
1. isoniazid
 2. chloramphenicol
 3. rifampin
 4. streptomycin sulfate
- 5-75. Which of the following drugs was developed with the sole purpose being the treatment of gonorrhea?
1. Penicillin G benzathene
 2. Nitrofurantoin
 3. Spectinomycin hydrochloride
 4. Doxycycline hyclate

Assignment 6

Pharmacology and Toxicology (continued) : Pharmacy

Textbook Assignment: pages 7-14 through 8-19

- | | |
|---|--|
| 6-1. Undecylenic acid is used as a/an <ol style="list-style-type: none">1. disinfectant2. antipyretic3. analgesic4. fungicide | 6-8. Which of the following drug(s) is/are contraindicated for a patient with peptic ulcer disease? <ol style="list-style-type: none">1. Acetaminophen2. Ibuprofen3. Furosemide4. Both 1 and 2 above |
| 6-2. In addition to the treatment of Phthirus, which of the following is effective in the treatment of scabies? <ol style="list-style-type: none">1. Nystatin2. Miconazole nitrate3. Lindane4. Metronidazole | 6-9. What chapter of the Manual of the Medical Department deals with the usage of controlled substances? <ol style="list-style-type: none">1. 152. 163. 184. 21 |
| 6-3. Trichomonas vaginalis can be treated with <ol style="list-style-type: none">1. crotamiton2. metronidazole3. fansidar4. mebendazole | 6-10. Death from an overdose of barbiturates is caused by _____ failure. <ol style="list-style-type: none">1. respiratory2. hepatic3. renal4. cardiac |
| 6-4. Drugs that destroy parasitic worms are known as <ol style="list-style-type: none">1. amebicides2. germicides3. germicides4. bactericide | 6-11. The drug of choice for the treatment and management of grand mal seizures is <ol style="list-style-type: none">1. methylphenidate hydrochloride2. phenobarbital3. phenytoin sodium4. any psychotropic agent |
| 6-5. The parasiticide that will color stools bright red is <ol style="list-style-type: none">1. pyrvinium pamoate2. thiabendazole3. fansidar4. pyrantel pamoate | 6-12. The two most important opium alkaloids are morphine and <ol style="list-style-type: none">1. paraldehyde2. codeine3. meperidine4. cocaine |
| 6-6. Supplemental potassium may be required with which of the following drugs? <ol style="list-style-type: none">1. Ibuprofen2. Furosemide3. Diphenoxylate hydrochloride4. Aspirin | 6-13. Prochlorperazine is a used mainly to <ol style="list-style-type: none">1. treat symptoms of nausea and vomiting2. alleviate symptoms of tension, agitation, and psychosis3. counteract the effects of alcohol withdrawal4. relieve respiratory distress |
| 6-7. Drugs used in the treatment of congestive heart failure may include <ol style="list-style-type: none">1. naproxen sodium2. furosemide3. ducosate calcium4. phenylbutazone | |

- 6-14. Drug therapy used to treat manic-depressive patients may include
1. diazepam
 2. lithium
 3. hydroxyzine hydrochloride
 4. flurazepam
- 6-15. Muscle relaxants include all of the following EXCEPT
1. methocarbamol
 2. diazepam
 3. cyclobenzaprine hydrochloride
 4. flurazepam
- 6-16. Occasionally used for cardiac the drug used primarily to prevent erection in postcircumcision adult males in
1. nitroglycerin
 2. digitoxin
 3. amyl nitrite
 4. epinephrine
- 6-17. Digitoxin increases the force of cardiac contraction by acting on the
1. vagus nerve
 2. valves of the heart
 3. heart muscle
 4. blood vessels
- 6-18. An appropriate drug to administer to a patient suffering an asthma attack is
1. amyl nitrite
 2. epinephrine
 3. phenylephrine hydrochloride
 4. atropine
- 6-19. The agent used to treat pernicious anemia is
1. cyanocobalamin
 2. ascorbic acid
 3. vitamin D
 4. vitamin K
- 6-20. The drug often used in conjunction with isoniazid therapy is
1. pyridoxine hydrochloride
 2. thiamine hydrochloride
 3. cyanocobalamin
 4. retinol
- 6-21. The vitamin deficiency associated with night blindness is
1. vitamin A
 2. vitamin B₆
 3. vitamin B₁₂
 4. vitamin K
- 6-22. The vitamin involved in absorption and use of calcium and phosphorus is
1. vitamin A
 2. vitamin B₁
 3. vitamin C
 4. vitamin D
- 6-23. Pellagra is a result of a diet deficient in
1. carotene
 2. thiamine
 3. riboflavin
 4. niacin
- 6-24. The general anesthesia agent most-commonly used in dentistry is
1. nitrous oxide
 2. halothane
 3. lidocaine hydrochloride
 4. sodium thiopentate
- 6-25. On what area of the body is proparacaine hydrochloride most widely used as a topical anesthetic?
1. Eyes
 2. Ears
 3. Nose
 4. Throat
- 6-26. Drugs that inhibit glandular secretions are known as
1. parasympathetic
 2. parasympatholytics
 3. sympathomimetics
 4. sympatholytics
- 6-27. An antispasmodic also used to treat peptic ulcer disease is
1. atropine
 2. propantheline bromide
 3. propranolol hydrochloride
 4. methocarbamol

- 6-28. Which of the following drugs may be administered with morphine to decrease the respiratory depressant effect of morphine?
1. Propantheline bromide
 2. Neostigmine methylsulfate
 3. Atropine sulfate
 4. Propranolol hydrochloride
- 6-29. Beta-adrenergic blocking agents are used as a prophylaxis to treat
1. migraine headaches
 2. hypertension
 3. angina pectoris
 4. any of the above
- 6-30. Which of the following is a characteristic side effect of antihistamines?
1. Nausea
 2. Drowsiness
 3. Urticaria
 4. Tinnitus
- 6-31. Which of the following drugs is administered to control motion sickness?
1. Cimetidine
 2. Meclizine hydrochloride
 3. Chlorpheniramine maleate
 4. Diphenhydramine hydrochloride
- 6-32. In conjunction with antacids, which of the following is used to treat duodenal ulcers?
1. Dimenhydrinate
 2. Diphenhydramine hydrochloride
 3. Ranitidine
 4. Pseudoephedrine hydrochloride
- 6-33. In the Navy, the chief purpose biological agents is
1. diagnosis
 2. immunization
 3. resuscitation
 4. pest control
- 6-34. Licensing of manufacturers of biological agents is the responsibility of the
1. Secretary of the Navy
 2. Public Health Service
 3. American Medical Association
 4. Secretary of the Treasury
- 6-35. Which of the following agents is only administered orally?
1. Plague
 2. Polio
 3. Tetanus
 4. Yellow fever
- 6-36. Yellow fever vaccine is reconstituted with
1. sterile water, USP
 2. Sterile sodium chloride injection, USP
 3. 5% dextrose in water, sterile, USP
 4. Triple distilled water, USP
- 6-37. The study of poisons is toxicology and does not cover which of the following fields?
1. Antidotes
 2. Chemical and physiologic effects
 3. Immunizations
 4. Detection and isolation
- 6-38. Ingestion of a toxic substance resulting in damage to the esophagus is known as a
1. remote effect
 2. local effect
 3. cumulative effect
 4. compound effect
- 6-39. Cocaine is classified as a/an _____ poison.
1. alkaloidal
 2. nonalkaloidal
 3. inorganic
 4. corrosive
- 6-40. Food infection differs from food intoxication in that food intoxication may be caused by
1. growth of salmonella bacteria
 2. growth of dysentery bacteria
 3. waste products of streptococcal bacteria
 4. waste products of dysentery bacteria

- 6-41. To determine if it is safe to use an emetic or lavage tube in treating a poisoning victim when the poison is unknown, you should
1. examine vomitus, stools, and urine of the victim
 2. examine the victim's eyes for dilation or pinpoint pupils
 3. examine the victim's mouth for mucosal damage
 4. check the victim's temperature
- 6-42. An emetic is administered to a patient to
1. empty the bowel
 2. induce vomiting
 3. induce sleep
 4. clear the nasal passages
- 6-43. The normal dose for syrup of ipecac is
1. 5 to 10 ml
 2. 10 to 15 ml
 3. 10 to 20 ml
 4. 15 to 30 ml
- 6-44. Controlled substances are those identified by
1. the Secretary of the Treasury
 2. Drug Enforcement Agency
 3. Navy Regulations
 4. Comprehensive Drug Abuse Prevention and Control Act
- 6-45. Which of the following substances may NOT be stored in a pharmacy or on a ward?
1. Nitric acid
 2. Glacial acetic acid
 3. Sulfuric acid
 4. Methanol
- 6-46. Valium is a schedule ____ substance .
1. II
 2. III
 3. IV
 4. V
- 6-47. On a small ship with only an independent duty corpsman aboard, an antidote locker must be located outside the entrance to the
1. ward room
 2. mess decks
 3. emergency treatment room
 4. chiefs mess
- 6-48. Items required in an antidote locker include all of the following EXCEPT
1. the reference Clinical Toxicology in Commercial Products
 2. the reference NAVMED P-5095
 3. an inventory list
 4. the phone number to the local poison control center
- 6-49. The reference that provides standards of purity, quality, and strength that are legally enforceable is
1. the United States Pharmacopoeia and National Formulary
 2. the Physicians' Desk Reference
 3. Remington's Pharmaceutical Sciences
 4. the United States Dispensatory
- 6-50. The correct abbreviation for the metric system of primary units of measure for weight, volume, and linear dimensions are
1. gr, l, cm
 2. gr, ml, m
 3. g, l, m
 4. g, l, cm
- 6-51. Which of the following is equal to one one-hundredth of a liter?
1. Dekaliter
 2. Deciliter
 3. Centiliter
 4. Milliliter
- 6-52. The basic unit of weight in the apothecary system is the
1. gram
 2. grain
 3. dram
 4. milliliter

- 6-53. The normal dosage of Kaolin Pectin mixture is 30 ml after each bowel movement. The pharmacist would most probably point directions on the label as follows: Take _____ after each bowel movement.
1. 1 teaspoonful
 2. 2 teaspoonful
 3. 1 tablespoonful
 4. 2 tablespoonful

- 6-54. A prescription requires 2 ounces of a substance stocked in liters. How many milliliters is required to fill the prescription?
1. 0.030
 2. 0.060
 3. 30.0
 4. 60.0

- 6-55. A compound requires 40 grains of a substance stocked in kilograms. How many grams are required to prepare the compound?
1. 0.62
 2. 2.6
 3. 4.2
 4. 2.400

Information for items 6-56 and 6-57 is as follows: Assume that the following is the correct formula for compounding 1,000 ml of potassium arsenate solution.

Arsenic trioxide	12.8 g
Potassium bicarbonate.	9.8 g
Alcohol	40.0 ml
Distilled water, qs to make.	1,000.0 ml

- 6-56. You receive a prescription for 285 ml of the preceding formula. How many milliliters of alcohol should you use in compounding the prescription?
1. 9.6
 2. 11.4
 3. 13.6
 4. 15.9

- 6-57. If you receive a prescription for 1,800 ml of the preceding formula, how many grams of arsenic trioxide will you use?
1. 7.80
 2. 19.40
 3. 23.04
 4. 25.60

- 6-58. A patient is to receive 1.8 million units of oxycillin IM. Using quantity sufficient sterile water to reconstitute a vial of 2.4 million units to 2 ml, how much of the solution should the patient receive?
1. 1.0 ml
 2. 1.25 ml
 3. 1.50 ml
 4. 1.75 ml

- 6-59. A patient is to receive a $\frac{3}{4}$ gr dose of phenobarbital. If you dissolve two $\frac{1}{2}$ gr tablets of phenobarbital in 30 ml of water, how much of the solution should the patient receive?
1. 15.0 ml
 2. 17.5 ml
 3. 20.0 ml
 4. 22.5 ml

- 6-60. Convert the decimal 0.625 to a fraction and reduce to its lowest term.
1. $\frac{3}{8}$
 2. $\frac{4}{8}$
 3. $\frac{5}{8}$
 4. $\frac{6}{8}$

- 6-61. Multiply the following fractions and reduce the product to its lowest term: $1\frac{1}{4} \times \frac{3}{8}$
1. $\frac{15}{16}$
 2. $\frac{15}{32}$
 3. $\frac{30}{64}$
 4. $\frac{5}{8}$

- 6-62. A physician writes a prescription for a solution that contains 4% alcohol. How many ml of alcohol should be used to prepare 150 ml of the solution?
1. 2
 2. 4
 3. 6
 4. 9

- 6-63. You have 360 grams of a compound. If 54 grams of the compound is silver nitrite, what is the percentage of silver nitrite?
1. 12.5
 2. 15.0
 3. 17.5
 4. 29.9

- 6-64. How many grams of sodium chloride are required to prepare 1 liter of a 1:5000 solution?
1. 0.2
 2. 0.4
 3. 2.0
 4. 4.0
- 6-65. What is the weight of 1 ml of distilled water?
1. 1 milligram
 2. 1 centigram
 3. 1 gram
 4. 1 gram
- 6-66. What is the specific gravity of 12 ml of a liquid weighing 13.6 grams?
1. 0.68
 2. 0.96
 3. 1.13
 4. 1.26
- 6-67. The processes of comminution involve which of the following actions?
1. Precipitation or levitation
 2. Levitation or tituration
 3. Colation or filtration
 4. Any of the above
- 6-68. The addition of a chemical to a clear solution that results in particles that can be filtered is known as
1. trituration
 2. decantation
 3. colation
 4. precipitation
- 6-69. The Fahrenheit equivalent to 10°C is ____°F
1. 47.0
 2. 40.2
 3. 50.0
 4. 52.8
- 6-70. Normal body temperature is 98.6°F. Normal body temperature in Celcius is ____ °C.
1. 23
 2. 30
 3. 37
 4. 41
- 6-71. The process used for separating and purifying liquid solutions is known as
1. maceration
 2. tituration
 3. distillation
 4. sublimation
- 6-72. Uniform distribution of heat, when heating a preparation with an open flame is accomplished by
1. using a low flame
 2. keeping the flame in constant motion beneath the container
 3. using a metal plate
 4. using a wire gauze
- 6-73. All pharmacies that dispense medications are required to have a Class ____ balance.
1. A
 2. B
 3. C
 4. D
- 6-74. Proper care and operation of the pharmaceutical balance includes all the following EXCEPT
1. adding weight with the balance in the locked position only
 2. cleaning the balance with alcohol
 3. using waxed paper on the pan
 4. storing the balance in a closed case in the locked position
- 6-75. Melting a fatty base, adding finely powdered medicine. and then allowing the base to return to its natural state is a process that results in a/an
1. lotion
 2. suspension
 3. ointment
 4. elixir

Assignment 7

Physical Examinations: Health Records: Preventive Medicine

Textbook assignment pages 9-1 through 11-26

- 7-1. The periodic physical examination provides an opportunity to do each of the following EXCEPT
1. correct physical defects
 2. counsel about smoking and stress management
 3. counsel regarding weight control and nutrition
 4. evaluate for hypertension
- 7-2. On the Standard Form 88, Report of Medical Examination, the gender of the individual is recorded as "M" or "F" as appropriate.
1. True
 2. False
- 7-3. Blocks 57 and 58 of the SF 88, Report of Medical Examination, must always have which of the following blood pressures recorded?
1. Sitting
 2. Sitting, recumbent, and standing
 3. Point exercise
 4. Both 2 and 3 above
- 7-4. The NAVMED 6120/2, Officer Physical Examination Questionnaire, is recommended for use for enlisted personnel
1. True
 2. False
- 7-5. All physical examinations must include, as a minimum, all of the following EXCEPT
1. serologic test for syphilis
 2. complete blood count
 3. microscopic urinalysis
 4. dental examination
- 7-6. Annual physical examinations are required for all officers beginning at age ____ and all enlisted personnel beginning at age ____
1. 24, 36
 2. 36, 36
 3. 36, 40
 4. 40, 40
- 7-7. A service member is being discharged due to a physical disability based on the results of a medical board evaluation. He or she is still required to have a complete physical examination documented on an SF 88.
1. True
 2. False
- 7-8. During a preplacement physical examination, a member is found not physically qualified for Operation DEEP FREEZE. This automatically means that the member is not fit for retention.
1. True
 2. False
- 7-9. Medical surveillance examinations are required for certain occupational fields or certain skills or jobs, e.g., people who work with beryllium or mercury. Specific guidelines on what tests are required and how often can be found in
1. BUMEDINST 5100.1
 2. COMNAVMEDCOMINST 5100.46
 3. OPNAVINST 5100.23
 4. SECNAVINST 6200.2
- 7-10. One method for testing near visual acuity is the
1. Snellen charts
 2. Jaeger cards
 3. Farnsworth lantern
 4. pseudoisochromatic plates
- 7-11. The preferred method for testing color vision is the
1. Snellen charts
 2. Jaeger cards
 3. Farnsworth lantern
 4. pseudoisochromatic plates

- 7-12. The health record of a military member may be used to
1. aid in determining claims
 2. determine physical fitness
 3. provide data for medical statistics
 4. do all of the above
- 7-13. A health Record is only opened in which of the following cases?
1. When a member returns to active duty from the retired list
 2. When the original record has been lost
 3. When first becoming a member of the naval service
 4. In all the above cases
- 7-14. A health record is NOT closed when a member
1. transfers to a new duty station
 2. transfers to the Fleet Reserve
 3. is placed on the retired list
 4. is declared missing inaction (MIA)
- 7-15. In which of the following circumstances should the health record be verified?
1. Upon reporting
 2. Upon transfer
 3. At the time of a physical examination
 4. In all of the above cases
- 7-16. Custody of health records is generally vested in the medical department. On ships without a medical department representative, an individual retains custody of the record
1. until transfer
 2. until transfer with verification every 6 months
 3. until transfer with annual verification
 4. The individual does not retain custody of the health record.

- 7-17. When a member is hospitalized in a foreign nation and the ship departs port, the health record is
1. retained on board.
 2. turned over to the hospital
 3. turned over to another U.S. vessel in port.
 4. forwarded to the nearest U.S. consulate or embassy.

To answer item 7-18, use the information below.

- a. A member transferred to a deployable unit
 - b. A member transferred overseas on an accompanied tour
 - c. A member transferred overseas on an unaccompanied tour
 - d. The family of a member transferred overseas accompanied
 - e. The family of a member transferred overseas unaccompanied
- 7-18. A physical evaluation in conjunction with NAVPERS 1300/16, Report of Suitability for Overseas Assignment, is performed for which of the above?
1. In b and c only
 2. In b, c, and e only
 3. In b, c, d, and e
 4. In all of the above
- 7-19. Health records are for official use only but are subject to inspection at any time by
1. the commanding officer or his or her superior
 2. authorized medical inspectors
 3. the fleet medical officer
 4. any of the above
- 7-20. Although considered privileged, release of information in the health record is required under the Freedom of Information Act.
1. True
 2. False

- 7-21. In the record category box on the health record treatment jacket, all active duty military records are identified by what color tape?
1. Red
 2. Black
 3. Blue
 4. White

For items 7-22 through 7-25, select from column B the health record form for recording the information in column A.

<u>Column A</u>	<u>Column B</u>
7-22. Blood typing and grouping	1. SF 600
	2. SF 601
7-23. Human immune virus tenting	3. DD1141
7-24. Sick call visit for poison ivy	4. NAVMED 6150/2
7-25. Results of radiation monitoring	

For items 7-26 through 7-29, select from column B the health record form that most closely related to the statement in column A.

<u>Column A</u>	<u>Column B</u>
7-26. Used for ordering corrective lenses	1. NAVMED 6150/4
7-27. May be used for an active duty patient who is admitted to the hospital for less than 24 hours	2. SF 539 3. SF 601 4. DD 771
7-28. A chronological list of duty stations and treatment sites	
7-29. A record of prophylactic immunization and sensitivity tests	

- 7-30. What is the correct disposition of the DD 698, Individual Sick Slip?
1. Insert is in the health record interfiled chronologically with the SF 600.
 2. Forward it to the Office of Medical Affairs after treatment.
 3. Return it to the treatment facility of origin after the information has been transcribed to a SF 600.
 4. Destroy it after the information has been transcribed to a SF 600.

- 7-31. The form used to record dental treatment is the
1. SF 600
 2. SF 602
 3. SF 603
 4. NAVMED 6150/20
- 7-32. Yellow tape across the upper right corner of the dental treatment record indicates a dental classification of
1. 1
 2. 2
 3. 3
 4. 4

- 7-33. Personal hygiene is an important component in maintaining and promoting good health and
1. inhibiting the spread of disease
 2. promoting good morale
 3. decreasing the risk of disabling disease
 4. all of the above

- 7-34. The marine unit you are assigned to has been maneuvering through a swamp all morning. At 1100 you break out into rolling farmland. As the unit corpsman, you should suggest
1. a rest break until 1200 to relieve fatigue
 2. that this would be a good time for lunch
 3. that feet should be dried and both socks and boots be changed
 4. a standard 10-minute program of limbering up exercising to prepare the troops for the next phase of the maneuver
- 7-38. Expired or empty containers of live vaccines should be handled in which of the following manners?
1. Routine daily trash disposal
 2. Held on board and disposed of weekly to a specified landfill
 3. Heat sterilized by burning, boiling, or autoclaving
 4. Either 2 or 3 above
- 7-36. Excluding polio and smallpox, pilots and air crew are medically grounded for a minimum of ____ hours after receiving a vaccination.
1. 6
 2. 12
 3. 24
 4. 36
- 7-37. When a basic series of a vaccination is begun then interrupted by operational commitments, the series is
1. considered complete.
 2. restarted if 90 days has passed.
 3. restarted if 180 days has passed.
 4. continued at the earliest opportunity.
- 7-38. A smallpox revaccination is checked after 1 week. If the area of revaccination exhibits no vesicle or area of induration, the revaccination is recorded as
1. major.
 2. minor.
 3. equivocal.
 4. nonreactive.
- 7-39. Which of the following immunizations is administered orally?
1. Mumps
 2. Yellow fever
 3. Poliovirus
 4. Hepatitis B virus
- 7-40. Personnel who have frequent contact with blood or blood products should receive which of the following vaccines?
1. Hepatitis B
 2. Mumps
 3. Adenovirus 4/7
 4. Measles and rubella
- 7-41. In many lesser developed countries, there is a lack of sanitary sewage or waste disposal and many diseases are endemic, i.e., hepatitis, cholera, and typhoid. For these particular diseases, the most probable means of transmission is
1. vector-borne
 2. vehicle-borne
 3. direct projection
 4. direct contact
- 7-42. The transmission of an infectious agent to a person through the bite of a flying insect is known as ____ transmission.
1. airborne
 2. direct
 3. vector-borne
 4. vehicle-borne

- 7-43. NAVMEDCOMINST 6220.2 outlines the need and procedures for submitting Disease Alert Reports. These reports are designed to notify higher authority of the need for and implementation of preventive measures for communicable diseases that relate to all of the following EXCEPT those that
1. may effect operational readiness
 2. are quarantinable under international agreement
 3. have no known cure
 4. the commanding officer deems necessary
- 7-44. The virus associated with AIDS is designated by all the following EXCEPT
1. human adenotropic virus
 2. human immune virus
 3. human T-lymphotrophic virus
 4. lymphadnopathy-associated virus
- 7-45. A medical intelligence report indicates that amebiasis is endemic in the area of your next port call. You should advise the crew to avoid which of the following to limit an outbreak on board?
1. Drinking pasturized beverages
 2. Having contact with local animal life
 3. Eating raw fruits and vegetables from local sources
 4. Drinking alcoholic beverages
- 7-46. Your command has its annual picnic inviting spouses and children. The next afternoon, several members of your command report to sick call, all with the same general symptoms of visual disturbances and vertigo, and loss of strength in both arms and legs. None of these patients has an obvious fever. You should probably suspect an outbreak of
1. chicken pox
 2. dengue fever
 3. botulism
 4. influenza
- 7-47. A patient reports to sick call complaining of a rash on his lower back that is very sensitive to pressure. Upon examination, you note a macropapular rash with raised vesicles extending from the midline of the back out and up toward the lateral margin of the upper abdomen on the left side; there is no rash on the right side. The most probable diagnosis is
1. smallpox
 2. poison ivy or poison oak
 3. measles
 4. herpes zoster
- 7-48. Which of the following probably is not transmitted by poor food handling techniques?
1. Cholera
 2. Amebiasis
 3. Hepatitis B
 4. Shigellosis
- 7-49. Proper sanitation and sufficient uncontaminated potable water are means necessary to prevent all of the following EXCEPT
1. amebiasis
 2. cholera
 3. giardiasis
 4. dengue fever
- 7-50. The control of dengue fever can be accomplished by
1. adequate water treatment
 2. mosquito control
 3. immunization
 4. increased nutritional intake
- 7-51. Viral hepatitis A is most commonly transmitted by
1. fecal oral route
 2. infectious blood products
 3. infested mosquitoes
 4. infected fleas and lice
- 7-52. During an influenza epidemic, investigation of contacts is necessary to locate the index case.
1. True
 2. False

- 7-53. Generalized symptoms of malaria may include
1. persistent fever of 105°F or above
 2. cyclic febrile and afebrile periods
 3. intensely painful mosquito bites
 4. hypothermia
- 7-54. Malaria is transmitted by the bite of the _____ genus of mosquito.
1. Aedea
 2. Anopheles
 3. Plasmodium
 4. Any of the above
- 7-55. The method used to control the acquisition and spread of malaria includes all of the following EXCEPT
1. immunization
 2. chemosuppressive therapy
 3. eliminate areas of impounded water
 4. daily use of insect repellents
- 7-56. Recovery from measles generally confers lifelong immunity.
1. True
 2. False
- 7-57. In his second week of recruit training, a recruit reports to sickbay complaining of a stiff neck, bad headache, and nausea. Upon examination, you find that he has a fever (101.6°F) and a very faint pinpoint rash on his chest and back. You should seriously consider which of the following possible diseases?
1. Meningitis
 2. Yellow fever
 3. Cholera
 4. Bubonic plague
- 7-58. The symptom that most clearly indicates the presence of mumps is
1. fever and chills
 2. loss of appetite
 3. general malaise
 4. swollen salivary glands
- 7-59. The initial symptoms of bubonic plague usually include
1. pneumococcal pneumonia
 2. septicemia
 3. swollen lymph nodes
 4. ulcerating skin lesions
- 7-60. Prevention of bubonic plague can be partially accomplished by
1. promoting personal hygiene
 2. rodent and flea control
 3. segregating military from indigenous population
 4. fly control
- 7-61. Delousing of a person is normally accomplished with
1. hot soap and water shower
 2. 1% malathion powder
 3. 1% lindane lotion
 4. 1% DDT powder
- 7-62. If a male patient has a urethral discharge and dysuria, but N. gonorrhea is not isolated, you should suspect
1. tertiary syphilis
 2. Chlamydial urethritis
 3. genital herpes
 4. herpes zoster
- 7-63. Infection by Beta-lactamase negative strains of N. gonorrhea are usually treated with
1. penicillin G
 2. ampicillin
 3. spectinomycin
 4. either 1 or 2 above
- 7-64. Genital lesions that do not show spirochetes under a dark field microscopic examination are probably the result of
1. herpes simplex type 2
 2. herpes zoster
 3. secondary syphilis
 4. latent or tertiary syphilis

- 7-65. An important aspect of syphilis control is the identification and interview of patient contacts. For a patient diagnosed with secondary syphilis, which of the following should be interviewed?
1. Contacts for only the last 3 months
 2. Contacts for only the last 6 months
 3. Contacts for the past year
 4. All members of the immediate family
- 7-66. An MS aboard your ship has a confirmed case of shigellosis following a port call in Kenya. Your course of action should be all of the following EXCEPT
1. isolate the patient from food handling
 2. obtain stool samples on all other food handlers
 3. begin intravenous fluid administration
 4. immediately MEDEVAC the patient
- 7-67. Significant infection caused by group A streptococcus include all of the following EXCEPT
1. scarlet fever
 2. erysipelas
 3. impetigo
 4. furuncles and carbuncles
- 7-68. Although a sore throat caused by group A streptococcus may spontaneously resolve, without proper treatment, serious complication may develop that may include
1. rheumatic heart disease
 2. tetanus
 3. hepatitis of decreased liver function
 4. meningitis
- 7-69. Tetanus is highly communicable from man to man.
1. True
 2. False
- 7-70. A person with a PPD reaction of 10 mm or more induration
1. must be isolated from the general population until treatment is complete
 2. will probably develop tuberculosis within a year
 3. must be placed on a 1 year regimen of antituberculous medication with periodic evaluation
 4. must have an annual chest x-ray
- 7-71. Typhoid fever is primarily transmitted by
1. biting insects
 2. exudate from open cuts and sores
 3. chlorinated water
 4. improper food handling techniques
- 7-72. Typhus fever is normally transmitted by
1. infected mosquitoes
 2. infected lice
 3. airborne virus
 4. ingestion
- 7-73. The Marine Corps unit you are assigned to is deployed to Honduras, near the border with Nicaragua, for a training mission in jungle survival and warfare. Four days after making camp, your company Gunnery Sergeant complains of being feverish, nauseous, and having a headache and backache. The next day, your senior platoon sergeant reports with the same symptoms. Examination reveals that both patients have a fever and are slightly jaundiced. You should seriously consider which of the following diseases?
1. Tularemia
 2. Filariasis
 3. Yellow fever
 4. Malaria

- 7-74. Food service personnel require a physical examination before initially reporting for food service duty and
1. every 30 days thereafter
 2. after any absence due to illness
 3. after each PPD test
 4. Upon termination of assignment
- 7-75. Which of the following would not necessarily be grounds for prohibiting a member from food service work?
1. Acne vulgaris
 2. Active intestinal parasites
 3. Active periodontal disease
 4. Gonococcal urethritis

Assignment 8

Preventive medicine (continued); Chemical, Biological, and Radiological Warfare; Administration; Supply

Textbook assignment pages 11-25 through 14-19

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| <p>8-1. During a food service sanitation inspection, you are required to</p> <ol style="list-style-type: none">1. verify that food service personnel have received the proper training2. verify the proper size of hand washing signs in lavatories3. personally inspect each member for cleanliness4. question each member about his or her personal hygiene practices <p>8-2. A vector control specialist may be which of the following who has received specialized training at a DVEC?</p> <ol style="list-style-type: none">1. Any preventive medicine technician2. Any advanced laboratory technician3. Any HM2 or above4. Both 1 and 2 above <p>8-3. To minimize the hazards of pesticide use, you should do all of the following EXCEPT</p> <ol style="list-style-type: none">1. wear an OSHA/NIOSH approved respirator with any cartridge available2. protect food and serving utensils3. read the instruction label on each pesticide each time you use it4. shower after each pesticide application job <p>8-4. The most important item in control of flies is</p> <ol style="list-style-type: none">1. proper sanitation measures2. screening of all buildings3. daily use of paradichlorobenzene (PDB) in latrines4. daily application of insecticides to areas with a high density population of flies | <p>8-5. Temporary mosquito control measures include</p> <ol style="list-style-type: none">1. aerosol space sprays of insecticides2. draining of impounded water3. adding Gambusia fish to large bodies of water4. burying bottles, cans, and tires <p>8-6. A bedbug infestation may be recognized by small, hard, white wheals on a patient and</p> <ol style="list-style-type: none">1. EPMU reports2. blood of excrement on the mattress3. pest on the deck4. all of the above <p>8-7. Cockroach infestation in food preparation areas can be controlled by</p> <ol style="list-style-type: none">1. adequate lighting 24 hours a day2. daily spraying with residual insecticides3. hourly disposal of refuse4. proper cleaning of food preparation areas, equipment, and utensils <p>8-8. In addition to proper sanitation, effective chemical control of cockroaches also requires</p> <ol style="list-style-type: none">1. elimination of harborages2. daily spraying with residual insecticides3. hourly disposal of refuse4. all of the above |
|--|--|

- 8-9. If you discover a tick feeding on you body, you should
1. remove it with tweezers or forceps
 2. coat it with Vaseline and let it drop off by itself
 3. burn it off with a lit match or cigarettes
 4. apply an antiseptic and ignore it; it will leave in a few hours
- 8-10. The recommended method of control for an infestation of mice is
1. poisoning
 2. trapping
 3. fumigation
 4. wire screening in all buildings
- 8-11. The best poisoned bait for the Norway rat is
1. fish or meat
 2. fruits or melons
 3. sweet potatoes
 4. bread or oatmeal
- 8-12. Although spring traps can be effective without bait, they are more effective when baited. Preferred baits may include all of the following EXCEPT
1. cheese
 2. coconut
 3. bacon rind
 4. fresh raw vegetables
- 8-13. Even though most naval shore activities receive water from a municipal source, the Navy is responsible for
1. ensuring the municipal water is chlorinated before receipt
 2. the integrity of the base water distribution system
 3. ensuring that the water received is pure
 4. the disinfection of all water received
- 8-14. One step in disinfecting water in a canteen is to
1. ensure the threads of the canteen neck are rinsed with treated water
 2. boil the water before treatment
 3. boil the water after treatment
 4. filter the water through a clean cloth, i.e. , cheese cloth
- 8-15. Shipboard water distilled from a suspected contaminated source must be chlorinated to ____ ppm after 39 minutes contact time.
1. 0.02
 2. 0.2
 3. 2.0
 4. 20.0
- 8-16. After a 24 hour incubation, you note eight reddish hued bacterial colonies on a water sample you are testing. You should
1. suspect fecal contamination and institute corrective action immediately
 2. incubate another sample from the same source. If the results are the same, submit another sample for outside testing
 3. log the results as background growth: no other action is required
 4. increase the FAC to 2.0 to 3.0 ppm
- 8-17. One of the differences that may determine whether to use a chemical or biological agent in warfare is that
1. biological agents are universally effective against humans and constant in their effect
 2. effective immunity against chemical agents is readily available
 3. immediate effects are produced with chemical agents
 4. there are significant difference

- 8-18. The general classifications of physiologic effects of chemical agents include all of the following EXCEPT
1. incapacitants
 2. sternutators
 3. harassing
 4. casualty producing
- 8-19. The tendency of a chemical agent to remain effective in a contaminated area is known as
1. lethality
 2. persistency
 3. volatility
 4. permeability
- 6-20. Inhalation of nerve gas characteristically results in
1. local muscular twitching
 2. dry mouth
 3. pinpoint pupils
 4. pulmonary l dome
- 8-21. In a definitive care facility, the indicated treatment of a nerve agent victim includes
1. 2 mg atropine and 600 mg 2-PAM chloride every 15 minutes until recovery
 2. 2 mg atropine every 15 minutes until the victim has a dry mouth and mild tachycardia
 3. 660 mg 2-PAM chloride every 15 minutes until the victim is conscious
 4. respiratory support only
- 8-22. Specific antidotal therapy is available for which, if any, of the following vesicants?
1. Mustard (HD)
 2. Nitrogen mustard (HM)
 3. Lewisite (L)
 4. None of the above
- 8-23. The part of the body most sensitive to the effects of mustard gases is the
1. eyes
 2. tracheobronchial tree
 3. liver
 4. skin
- 8-24. First aid treatment for blood agents is amyl nitrite ampules followed by
1. oral potassium chloride
 2. oral sodium thiosulfate
 3. intravenous potassium chloride
 4. intravenous sodium thiosulfate
- 8-25. The symbol for phosgene gas is
1. Cl
 2. CN
 3. CG
 4. CK
- 8-26. An early indication of exposure to phosgene gas in casualty producing amounts is the smell of
1. bitter almonds
 2. a freshly mown lawn
 3. geraniums
 4. none of the above. Phosgene is undetectable.
- 8-27. The chemical agent that primarily effects the higher regulatory functions of the CNS is known by the symbol
1. AC
 2. BZ
 3. CN
 4. CC
- 8-28. Exposure to fresh air and allowing wind to blow across wide open eyes is generally sufficient treatment for
1. psychochemicals
 2. lacrimators
 3. vomiting agents
 4. glycolates
- 8-29. With exposure to Adamsite, which, if any, of the following actions must be taken to minimize or inhibit the symptoms of exposure?
1. Don a protective mask and continue duties as vigorously as possible.
 2. Give an intramuscular injection of physostigmine.
 3. Give an intravenous infusion of sodium thiosulfate.
 4. Do none of the above.

- 8-30. Burning white phosphorus particles embedded in the skin are treated by
1. surgical removal followed by a copper sulfate wet dressing
 2. a copper sulfate rinse then surgical removal
 3. a copper sulfate rinse only
 4. allowing them to burn out
- 8-31. In the event of a nuclear detonation, the best position to assume is
1. sitting, with the knees drawn up to the chest, facing away from the blast
 2. supine with the face covered
 3. on your side, in a fetal position facing away from the blast
 4. face down with your face covered
- 8-32. The treatment of thermal burns from a nuclear detonation differs from more conventional burn wounds in that
1. conventional burn wounds are generally less serious
 2. conventional burn wounds are more likely to become infected
 3. burning resulting from a nuclear detonation are more painful
 4. there is no difference
- 8-33. A serious internal radiation hazard, alpha particles can enter the body through
1. the digestive system
 2. the respiratory system
 3. open wounds
 4. any of the above
- 8-34. Of the following, which type of radiation has the greatest penetrating power?
1. Alpha
 2. Beta
 3. Gamma
 4. Neutron
- 8-35. When using antibiotic for victims of radiation injuries, it is recommended that you use
1. one-half the normal dosage
 2. the nominal dosage
 3. two times the normal dosage
 4. three times the normal dosage
- 8-36. The Medical Department Journal contains a chronological record of events concerning the Medical Department and should include all of the following EXCEPT
1. reports of personnel casualties, injuries, or deaths
 2. personnel entered onto or deleted from the binnacle list
 3. medical histories of personnel
 4. training lectures to stretcher barriers
- 8-37. NAVMED 6320/18, Binnacle List, is used to list all personnel
1. admitted to the hospital
 2. excused from duty for 24 hours or less because of illness
 3. excused from duty for more than 24 hours because of illness
 4. who reported to sick call in the morning
- 8-38. NAVMED 6320/20, Morning Report of the Sick, must be submitted to the commanding officer daily by
1. 0800
 2. 0900
 3. 1000
 4. 1100
- 8-39. When submitting the monthly Medical Services Outpatient Morbidity Report, the reported condition is
1. submitted only for personnel admitted as inpatient
 2. submitted only in the event of death
 3. the initial complaint
 4. the final diagnosis

- 8-40. The Medical Services and Out-patient Morbidity Report is required to be
1. Postmarked not later than the fifth working day of the month
 2. received by NAVMEDDATSERCEN not later than the fifth working day of the month
 3. postmarked not later than the tenth day of the month
 4. received by MAVMEDDATSERCEN by the tenth day of the month
- 8-41. A notice issued under the Navy Directive Issuance System has the same force and effect as an instruction.
1. True
 2. False
- 8-42. Routine unclassified correspondence must contain all of the following items in the identification symbol EXCEPT
1. standard subject identification symbol
 2. date
 3. serial number
 4. organization code
- 8-43. Which of the following is the correct format for the subject line of routine unclassified correspondence?
1. Request for Full Time Outservice Training
 2. REQUEST FOR FULL TIME OUTSERVICE TRAINING
 3. Full Time Outservice Training, Request for
 4. FULL TIME OUTSERVICE TRAINING, REQUEST FOR
- 8-44. The signature block on all copies of correspondence must be
1. signed for all correspondence signed "By direction"
 2. initialed by the commanding officer for all correspondence signed "By direction"
 3. initialed by the person typing the correspondence
 4. none of the above, only the original is signed
- 8-45. Speedletters are used
1. for classified material requiring priority handling
 2. to issue directives
 3. because they are easy
 4. for unclassified material requiring priority handling
- 8-46. The process used to determine the correct subject group under which documents should be filed is
1. grouping
 2. coding
 3. classifying
 4. cross-referencing
- 8-47. A Navy letter carries the subject identification number 5320. What is the major subject of the letter?
1. Military personnel
 2. Operations and readiness
 3. General administration and management
 4. Financial management
- 8-48. Tickler files are used to determine all of the following EXCEPT
1. when reports are due
 2. ship's movement/port schedule
 3. when physical examinations are required
 4. immunization schedules
- 8-49. The OCR scanner will reject any document that has
1. erasures
 2. strikeovers
 3. misalignments
 4. any of the above
- 8-50. Fabric ribbons must be used for typing since carbon ribbons do not provide adequate and consistent density.
1. True
 2. False
- 8-51. The block delete symbol is represented by a/an
1. "Christmas tree"
 2. elongated hyphen
 3. chair
 4. hook

- 8-52. The document control listing serves which of the following functions?
1. Provides a serial number for each OCR document received
 2. A receipt from NMPC of each document received
 3. A listing of errors in each document received
 4. All of the above
- 8-53. The Naval Medical and Dental Material Bulletin, COMNAVMEDESUPPCOM NOTE 6700 is published
1. monthly
 2. quarterly
 3. semiannually
 4. annually
- 8-54. Which of the following types of appropriations is not normally used by the Navy?
1. Multiple-year
 2. Annual
 3. Continuing
 4. Apportioning
- 8-55. At the end of the second quarter, funds that have not been obligated in the previous quarter are
1. carried over into the next quarter
 2. carried over into the next year
 3. returned to the Treasury
 4. placed in the command's welfare and recreation fund
- 8-56. The shipboard medical OPTAR may be used to purchase all of the following items EXCEPT
1. x-ray units and film processors
 2. medical books and publication
 3. first aid gun bags
 4. litters and stretchers
- 8-57. The Federal Supply Catalog system is administered by the
1. Comptroller of the Navy
 2. Secretary of Defense
 3. Defense Logistics Agency
 4. Secretary of the Navy
- 8-58. Which of the following characteristics could designate an item as controlled equipage?
1. High cost
 2. Liable to pilferage
 3. Required for ship's mission
 4. Each of the above
- 8-59. The first four digits of a National Stock Number are known as the
1. Federal Supply Classification code
 2. Federal Stock number
 3. National Identification number
 4. Cognizance symbol
- 8-60. How many digits are in a National Stock Number?
1. 9
 2. 10
 3. 12
 4. 13
- 8-61. In which of the following would you find acquisition advice codes, handling or storage codes, and a brief description of each item?
1. Management Data List (MDL)
 2. Identification List (IL)
 3. Authorized Medical Allowance List (AMAL)
 4. Naval Supply System Command Manual
- To answer items 8-62 through 8-64, select from the table below the level of supply defined in the item.
1. Stockage objective
 2. Safety level
 3. Operating level
 4. Requisitioning objective
- 8-62. The quantity of an item required to support operation between the time a requisition is submitted and receipt of material
- 8-63. The minimum amount of an item of material required to support operations
- 8-64. The maximum amount of material in stock and on order to support operation

- 8-65. Medical journals and books may be ordered on a
1. Dd Form 1149, Requisition and Invoice/Shipping Document
 2. NAVSUP Form 1250-1, Single-Line Item Consumption Document (manual)
 3. DD Form 1348m, DOD Single-Line Item Requisition Document (mechanical)
 4. DD Form 1340m, Non-NSN Requisition (manual)
- 8-66. The Urgency of Need Designator (UND) on a requisition is assigned by the
1. activity requiring the material
 2. supply depot
 3. stock point
 4. inventory control point
- 8-67. A Report of Discrepancy, SF 364, is used to
1. determine the cause of a discrepancy
 2. effect corrective action on a discrepancy
 3. prevent recurrence of a discrepancy
 4. do all of the above
- 8-68. The primary purpose of an inventory is to
1. locate missing items
 2. determine what items are in a storeroom
 3. ensure balances on hand match stock record cards
 4. balance the OPTAR
- 8-69. Inventory of controlled substances must be conducted
1. Weekly
 2. monthly
 3. quarterly
 4. semiannually
- 8-70. Contingency supply blocks are inventoried
1. monthly
 2. quarterly
 3. semiannually during the first and third quarter
 4. annually in October

COURSE DISENROLLMENT

All study materials must be returned. On disenrolling, fill out only the upper part of this page and attach it to the inside front cover of the textbook for this course. Mail your study materials to the Naval Education and Training Program Management Support Activity.

PRINT CLEARLY

NAVEDTRA NUMBER		COURSE TITLE	
80669		Hospital Corpsman 3 & 2	
Name	Last	First	Middle
Rank/Rate		Designator	Social Security Number

COURSE COMPLETION

Letters of satisfactory completion are issued only to personnel whose courses are administered by the Naval Education and Training Program Management Support Activity. On completing the course, fill out the lower part of this page and enclose it with your last set of answer sheets. Be sure mailing addresses are complete. Mail to the Naval Education and Training Program Management Support Activity.

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NAVEDTRA NUMBER	COURSE TITLE
80669	Hospital Corpsman 3 & 2
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ZIP CODE	

MY SERVICE RECORD IS HELD BY:

Activity
Address
ZIP CODE

Signature of enrollee

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Under the authority of Title 5 USC 301, information regarding your military or other DOD status is requested on this answer sheet in order to complete a Navy Correspondence Course. The information will also be used to process course completion letters and to construct and maintain an official and continuing record of correspondence course participation. The cumulative course participation record will not be divulged, without written authorization, to anyone other than those within the DOD for official use in determining performance and effecting organizational and administrative management.

A FINAL QUESTION: What did you think of this course? Of the text material used with the course? Comments and recommendations received from enrollees have been a major source of course improvement. You and your command are urged to submit your constructive criticisms and your recommendations. This tear-out form letter is provided for your convenience. Typewrite if possible, but legible handwriting is acceptable.

Date _____

From: _____
(RANK, RATE, CIVILIAN)

SSN: _____

ZIP CODE _____

To: Commanding Officer
Naval Health Sciences Education and Training Command (Code 05)
National Naval Medical Clinic
Bethesda, MD 20814-5022

Subj: NRTC HOSPITAL CORPSMAN 3 & 2, NAVEDTRA 80669

1. The following comments are hereby submitted:

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DEPARTMENT OF THE NAVY

**COMMANDING OFFICER
NAVAL HEALTH SCIENCES
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TITLE _____ NAVEDTRA _____

NAME _____ ADDRESS _____
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RANK/RATE _____ SOC. SEC. NO. _____ City or FPO State Zip
DESIGNATOR _____ ASSIGNMENT NO. _____
☐ USN ☐ USNR ☐ ACTIVE ☐ INACTIVE OTHER (Specify) _____ DATE MAILED _____

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